2011 Public Safety Realignment Act:


July 2016
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EXECUTIVE SUMMARY

Public Safety Realignment was landmark 2011 legislation intended to reduce the state prison population by shifting the responsibility of lower-level offenders to counties, with the intent of improving public safety outcomes for the adult offender population.

The goals of the legislation were many, including to:

- Protect California’s essential public services;
- Create a government structure that meets public needs in the most effective and efficient manner;
- Assign program and fiscal responsibility to the level of government that can best provide the service;
- Provide dedicated revenues to fund these programs;
- Provide as much flexibility as possible to the level of government providing the service;
- Focus the state’s role on appropriate oversight, technical assistance, and monitoring of outcomes (Governor’s Budget Summary, 2012-13).

The state allocates approximately $1 billion annually to the counties to house offenders who the courts previously would have sent to state prison, to supervise them through local probation departments, and to provide programming designed to reduce recidivism. County spending plans are created locally by Community Corrections Partnerships (CCPs), which are chaired by the county probation chief, and include leaders of local law enforcement, the courts, county mental health, and victim and community advocacy. County Boards of Supervisors review and approve the plans pursuant to section 1230.1 of the Penal Code.

“To help the state and public understand local approaches, the Budget Act of 2015 (AB 93, Chapter 10) appropriated $7,900,000 for counties that prepare and submit their reports on the implementation of local CCP plans to the Board of State and Community Corrections (BSCC). The county CCP implementation plans are summarized in this document.

In preparation for this annual report, the BSCC surveys the counties (see Appendix) to collect information. This year’s survey covers a range of topics, including CCP membership, Fiscal Year (FY) 2014-15 and FY 2015-16 Realignment allocations, and goals and objectives. For the first time, this year’s survey included optional questions regarding the counties processes for determining program evaluation and local capacity to offer services.

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In November 2015 the BSCC provided these surveys to each county Chief Probation Officer in his or her capacity as CCP Chair. CCP Chairs were asked to share the survey with members, collaborate on responses, and submit a response representative of the CCP view by December 2015. Counties that provided completed surveys received an allocation as outlined in the 2015 Budget Act as follows:
$100,000 to each county with a population under 200,000, inclusive, $150,000 to each county with a population of 200,001 to 749,999, inclusive, and $200,000 to each county with a population of 750,000 and above. Allocations were determined based on the most recent county population data published by the Department of Finance.

This legislative report describes how counties used Realignment allocations to invest in varied approaches to offender treatment, including mental health services, education, diversion, and alternatives to incarceration. Many counties also reported investing in evidence-based programming and evaluating local programs and services for effectiveness in reducing recidivism.

Examples of a local best practice or promising programs include:

- Turning Point of Central California in conjunction with the Fresno County Probation Department operates the First Street Center locally. The First Street Center-Full Service Partnership program (FSC-FSP) is a Mental Health Services Act (MHSA) partnership serving approximately 1,055 adults at any given time, referred by the County of Fresno AB 109 Probation Department. FSC-FSP provides comprehensive mental health/co-occurring services and works in conjunction with the Fresno County Probation Department to fulfill agreed upon treatment goals.

- The Los Angeles Skid Row Pilot Project was developed in 2015. This program co-locates two deputy probation officers and local law enforcement in the “skid row” area of downtown Los Angeles. Twice a month, the teams set up the mobile resource center to enable homeless persons residing in the area the opportunity to report for supervision and be connected with services such as housing, employment, substance use disorder treatment and mental health treatment. The project has displayed positive results in that they have seen a reduction in the number of warrants issued in the area and they have moved several supervised persons off of “skid row” and into transitional housing.

- The San Luis Obispo Behavioral Health Department’s community-based post-release treatment program served 229 new or continuing clients in FY 2014-15. The average stay of treatment services was 180 days and 91.4 days in sober living housing services. The successful completion rate was 55 percent, consistent with the previous year's treatment completion rate.

For the first time, the BSCC also surveyed counties on a series of optional questions that include local capacity, use of BSCC definitions (see Appendix) and evaluation results, and programmatic changes and/or course corrections. Responses included:

- 40 counties evaluate the effectiveness of programs and/or services (Figure 1)
- 42 counties consider evaluation results when funding programs and/or services (Figure 2)
- 50 counties allocate a percentage of Realignment funds to evidence-based programming (Figure 3)
- 34 counties use the BSCC definition of average daily population
- 27 counties use the BSCC definition of conviction
- 24 counties use the BSCC definition of length of stay
- 29 counties use the BSCC definition of treatment program completion rate
- 32 counties use the BSCC definition of recidivism
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

**Figure 1**

- Yes, 69%
- No, 22%
- No Response, 9%

Does the county consider evaluation results when funding programs and/or services?

**Figure 2**

- Yes 78%
- No 22%

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming?

**Figure 3**

- More than 81%
- 61 to 80%
- 41 to 60%
- 21 to 40%
- Less than 20%
- Did not report
When asked to describe a programmatic change and/or course correction made in the implementation of Realignment that other counties would find helpful, counties responded in many ways. Please see the individual survey responses for all of them. Here are a few examples in their own words.

- “Monterey County housing services have gradually increased since the beginning of Realignment. We initially offered case management for homeless offenders to provide them help in finding affordable housing, potential financial support to pay for overnight motel fees, rent or deposit fees for rental units and placement in local shelters. As we observed need, we expanded services to include six month transitional housing and have been able to see the benefits of stable housing. It has allowed for better opportunities to intervene in high-risk behaviors and it has allowed more opportunities for program participation and employment.”

- “San Joaquin County created a community-based organization compliance monitoring process to help ensure accountability, consistency and transparency to make sure there is fiscal responsibility. This lengthy process is done once a year with a report going to the Executive Committee. The process includes a self-monitoring report, site visit, contract agency staff interviews, internal staff interviews, participant interviews, file reviews, semi-annual review, final summary evaluation, follow-up/assistance report, corrective action plan and a correction action plan progress review.”

- “Based on needs and service data, Santa Cruz County has dramatically expanded funding for cognitive behavioral interventions targeting criminal thinking, behaviors and identity. The CCP has increased the scope and scale of mental health services, including group and individual counseling, and system navigation services. This reflects the need identified during the first two years of AB 109 implementation for mental health services to individuals with mental health issues that impair their ability to engage and benefit from services targeting criminogenic needs, but that are not serious enough to warrant services through the County's System of Care.”

- “Santa Cruz County continues to partner with the Pew-MacArthur Results First Initiative in order to maintain a priority on programs and strategies that are proven effective and which result in a positive benefit/cost ratio. The Results First economic modeling tool, now in its second generation, is being used to inform the selection and funding of programs to address recidivism. In order to enhance outcomes for substance use disorder (SUD) treatment, the CCP has developed a pilot Recovery Maintenance Program. This program changes the nature of SUD treatment from an episodic, acute-response model to one of ongoing support for a chronic health condition. The program includes expanded assessment, engagement and discharge planning, "telehealth" continued communication for up to a year following discharge, ongoing assessment and rapid/priority return to treatment as needed in response to relapse triggers. The program is expected to shift the culture of SUD treatment and the expectations of staff and clients, resulting in better long-term outcomes and reduced criminal recidivism.”

This legislative report provides a high-level overview and does not capture all local events, meetings, or decisions occurring in each county. Whenever possible, the narrative and figures provided present information as reported by the county. Attending local CCP meetings and reading each county’s local implementation plan remain the most comprehensive way to gather county-specific information. Additional information on Realignment, CCP plans, and the BSCC’s annual reports on the implementation of local CCP plans can be accessed from the BSCC website at http://www.bscca.gov/index.php.
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INTRODUCTION

Senate Bill (SB) 678 (Chapter 608, Statutes of 2009) implemented the California Community Corrections Performance Incentives Act and introduced the concept of local community corrections advisory boards known as the Community Corrections Partnerships (CCPs). Each CCP is tasked with recommending a local public safety plan to its county Board of Supervisors for approval.

SB 92 (Chapter 36, Statutes of 2011) subsequently required the Board of State and Community Corrections (BSCC) to collect each county’s CCP implementation plan as adopted by the Board of Supervisors and authorizes the BSCC to evaluate, publish, and disseminate statistics and other information on the condition and progress of criminal justice in the state. Effective July 1, 2013, and annually thereafter, the BSCC is required to submit a report to the Governor and the Legislature on the implementation of CCP plans. This legislative report respectfully is submitted in fulfillment of this mandate and is the fourth annual report on county implementation of CCP plans.

Pursuant to SB 92, the BSCC has surveyed counties since 2012 to collect information on their CCP plans for this report. In November 2015, each county was asked to provide information about the implementation of its Fiscal Year (FY) 2014-15 CCP Plan, progress in achieving outcome measures, programs and services, and funding priorities and plans for FY 2015-16 allocation of funds (AB 93, Chapter 10, Statutes of 2015). All 58 counties responded to this survey providing varying detail on local goals, outcome measures, fiscal information, and local best practices.

Since Realignment, each county has taken a unique approach to developing its local public safety approach. Diverse approaches, include funding allocations, target populations, community stakeholders, and goals, are described throughout the report. The remainder of the report includes Individual County Profiles and an Appendix consisting of a Glossary of Terms and the FY 2015-16 CCP survey.
# Alameda County

## Goals, Objectives, Outcome Measures and Progress

### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protect the public through transparent and accountable administration and service</td>
<td>Reduce Recidivism</td>
<td>Number/percent of clients with a new conviction, Number/percent of violations filed</td>
<td>From FY 2013-14 to 2014-15, new convictions and violations have declined by 11.8% and 3% respectively</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure effective and supportive transitions from detention to the community</td>
<td>Connect clients to supportive services, pre- and post-release</td>
<td>Number/percent of PRCS clients enrolled in services</td>
<td>The county offered services to clients at the Transition Day Reporting Center and Operation My Home Town, subsequently 65% of referred PRCS clients were enrolled into services</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objectives</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop innovative and therapeutic support for clients focused on health, housing and improving access to family sustaining employment</td>
<td>Connect clients to housing and employment</td>
<td>Number/percent of employed PRCS clients, Number/percent of PRCS clients with benefits after 90 days of employment, Number/percent of PRCS clients participating in the housing program exiting with permanent housing</td>
<td>73% of PRCS clients were employed, 48% received benefits after 90 days of employment and 47% exited with permanent housing</td>
</tr>
</tbody>
</table>

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

*District Attorney eCrimms system

Note: 50% of our base FY 15-16 funding was allocated to community-based organizations, one-time growth and carry-over funds were used to bridge the gap to fund the public agencies at the above amounts. The total amount approved for community-based services and services provided by County Departments totals $45.8 million, which exceeds the currently budgeted funding amount of $39.1 million by $6.7 million.

**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

- **Social Workers**: FY 2015-16 $1,300,000, FY 2014-15 $1,300,000
- **Clean Slate/Victim Witness, etc**: FY 2015-16 $1,300,000, FY 2014-15 $1,300,000
- **In-custody services**: FY 2015-16 $18,000,000, FY 2014-15 $18,000,000
- **Realignment Service Delivery**: FY 2015-16 $2,200,000, FY 2014-15 $2,200,000
Employment Service Providers includes Oakland Private Industry Council, Acts Full Gospel, Center for Employment Opportunities and Building Opportunities for Self-Sufficiency. Housing includes Abode Services, Berkeley Food & Housing Project and East Oakland Community Project. Mental Health/Substance Services includes over 30 providers.

Housing includes Abode Services, Berkeley Food & Housing Project and East Oakland Community Project. The Request for Proposal will award funding to organizations in eight categories, these include behavioral health services, innovation, case management, community capacity, education, employment pre-trial and mentoring. Ongoing services includes employment providers.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the county has released a Request for Proposal and will award a contract by December 2015 to an organization to conduct a formal evaluation of our realignment efforts.

Does the county consider evaluation results when funding programs and/or services?

Yes, the county obtains feedback from staff and clients in determining funding for programs and services and, as noted above, we plan to contract with an outside evaluator to more formally evaluate our programs and services. We will utilize this information to inform future funding decisions.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC recidivism definition.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. Examples include:

- The Probation Department and case managers working in our local jail conduct risk and needs assessment and services are delivered based upon these results.
- Probation Department staff have been trained in motivational interviewing and Cognitive Behavioral classes are offered through our Transition Day Reporting Center (TDRC).

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Mental health services, as follows:

- In-Custody: medication evaluations and counseling, psychiatric hospitalization (5150 crisis) and pharmacy; and
- Out-of-Custody: psychiatric hospitalization and residential, crisis medication, counseling and pharmacy

Substance use disorder services, as follows:

- Out-of-Custody: detox, sobering station, residential/recovery residences, outpatient group and individual sessions, care management and narcotic treatment programs (dosing and counseling)

What challenges does your county face in meeting these programming and service needs?

Developing a robust data system that will collect and report services and outcomes for both public and community agency service providers has been a challenge due to the number of agencies and resources available to clients in Alameda County.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Probation Department applied for and received federal funding to augment services within our day reporting center that will allow us to better address gender-based services and case
management. Additionally, we are working more collaboratively to leverage resources and funding from a variety of partners to increase services and improve communication and outcomes. For example, the Alameda County Workforce Investment Board received federal funding to create a One-Stop Center at our local jail. We will be leveraging their funding and resources to increase services and improve outcomes for our clients, pre-release and post-release.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Significant strides have been made with the implementation of our TDRC. We are focusing on the high-risk/high need clients and providing a plethora of services and support to address their needs and to reduce recidivism. We have exceeded our goal of 75% of clients connecting to services in only eight months of operation. Currently, 80% of the clients referred have successfully connected to the TDRC. The center is operated by a local community-based organization (CBO). Services are rendered based upon the completion of a validated risk/need assessment and a case plan is developed jointly with the client, the assigned deputy probation officer and the case manager located at the TDRC. Through coordination and collaboration, with the Probation Department's lead, the TDRC has established positive onsite connections to both CBOs and governmental agencies that provide services such as employment, housing, health and education. In regards to education, we offer an onsite accredited school where clients can get educational assistance at their own pace. Many classes are offered on-site, such as Cognitive Behavioral and parenting classes. Additionally, clients receive gourmet meals prepared by formerly incarcerated individuals participating in a job-training program; the meals are catered to the facility, daily. Clients receive transportation from the local jail to the center along with transportation to offsite offices, such as DMV and the Social Security Administration in order to obtain needed identification. The TDRC is a family-oriented center where the client and his/her family can reunite and participate in positive events within the community. We have received positive feedback from both Probation Department staff and clients as we work together to positively impact our community and its residents.
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## Alpine County
### Goals, Objectives, Outcome Measures and Progress
#### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Maintain offender accountability and public safety throughout the duration of their probationary period</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>To prevent the negative impact on local crime patterns due to former prison inmates and parolees being supervised locally</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Increase/decrease of local crime in the county</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Provide successful alternative sentencing options</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>Provide additional resources to the Probation Department to offer services</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Post-release community supervision (PRCS) rates</td>
</tr>
<tr>
<td></td>
<td>Grants of probation rates</td>
</tr>
<tr>
<td><strong>Note:</strong></td>
<td>It is difficult to providing alternative sentencing options in Alpine County due to a lack of infrastructure and available programs. There are limited employment opportunities, few non-profit organizations and no treatment or counseling centers other than programming offered by county Behavioral Health. In those instances when an alternative sentencing option is identified, it is difficult to get clients to those locations. Specifically, there is no public transportation and the terrain is difficult to traverse in harsh winter conditions. Offered programs are mostly in either El Dorado County, which is 32 miles away and over a pass with an elevation of 7,740 ft., or over the state line in Nevada. Local programs are greatly needed.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Provide successful offender rehabilitation options to offenders as close to their home as possible</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>Offer additional treatment options</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Number of successful offender rehabilitations</td>
</tr>
</tbody>
</table>

The CCP meets semi-annually
**Goal:** Implement a Probation case management program

**Objective:**
- Expedite tracking and data collection of PRCS and probationers
- Case management program implemented
- Increase efficiency and time management in the Probation Department

**Note:** The entire Probation Department consist of a part-time Chief Probation Officer and a full-time Administrative Assistant. Subsequently all case management tracking is completed manually.

**Goal:** Implement GPS and Secure Continuous Remote Alcohol Monitoring (SCRAM) through the Probation Department

**Objective:**
- Ability to monitor PRCS and probationers more affectively

**Progress:**
- The county is implementing a monitoring process

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**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Category</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheriff</td>
<td>$40,000</td>
<td>$40,000</td>
</tr>
<tr>
<td>Miscellaneous services*</td>
<td>$8,000</td>
<td>$8,000</td>
</tr>
<tr>
<td>Indirect costs</td>
<td>$71</td>
<td>$71</td>
</tr>
<tr>
<td>Alpine County Government Center</td>
<td>$128,000</td>
<td>$128,000</td>
</tr>
<tr>
<td>El Dorado County Jail Contract</td>
<td>$52,000</td>
<td>$55,000</td>
</tr>
<tr>
<td>Probation</td>
<td>$40,900</td>
<td>$40,900</td>
</tr>
<tr>
<td>Radios, Equipment and Supplies</td>
<td>$4,000</td>
<td>$4,000</td>
</tr>
<tr>
<td>Meetings and Training</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td>Miscellaneous services*</td>
<td>$366</td>
<td>$366</td>
</tr>
<tr>
<td>Miscellaneous services*</td>
<td>$91</td>
<td>$91</td>
</tr>
</tbody>
</table>

*This may be increased due to increased in-custody services including catastrophic medial expense.*
FY 2014-15: Alpine County Government Center - funds were allocated to remodel probation space in the Court House, create a space to meet and interview probationers, construct a new restroom to include facilities for collecting drug test samples, add employee break room, add security doors and a business transaction window, modify the exterior entry into the building, upgrade the fire sprinkler and fire alarm systems, upgrade the building security alarm system and repair the wastewater drain lines.

El Dorado County Jail Contract - Alpine County does not have a jail or detention center. There is a contract with El Dorado County based on a daily bed charge for inmates held there for incarceration of any kind.

FY 2015-16: Alpine County Sheriff Department - funds were allocated to a Deputy position to increase enforcement activities and local control by the Sheriff's charge for inmates held there for incarceration of any kind.

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the county evaluates the effectiveness of programs through local agencies.

Does the county consider evaluation results when funding programs and/or services?

Yes, local agency programs are evaluated when funding is needed through the CCP.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definition for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. We seek out only evidence-based programs, but locally we have no programs other than Alpine County Behavioral Health. When tasked with finding more intense or inpatient treatments we have to look outside the county and sometimes look to Nevada for appropriate programs. Those inpatient programs that are used are evidence-based.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Alpine County has limited resources when offering treatment. Our Behavioral Health Department is the only agency in the county to offer evaluations and outpatient services which includes mental health, substance use disorder and behavioral health programs. When seeking services for DUI programs, inpatient care including 5150 PC holds, our probationers have to travel to or be transported to El Dorado County or other counties where services can be obtained and even into Nevada for programs and treatment.

What challenges does your county face in meeting these programming and service needs?

Alpine County is the least populated county in the State of California. It is a remote seasonal community with no television stations, no newspaper, store, bank, hospital, or gas station. It is geographically isolated with an area of about 758 square miles and population of around 1,100 people. Alpine County’s only school is K-8. Up until this year the high school students were all bussed to Nevada to attend high school and graduated in Nevada. This year there is an option of transportation to El Dorado County in California for high school. As you can see, the challenges are vast. There are many things to be considered—probationer’s treatment is simply one of them.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Alpine County has successfully negotiated a Memorandum of Understanding (MOU) with the local Washoe Tribal Community, Bureau of Indian Affairs, which was approved by the Congress of the United States for felony law enforcement services, including probation and child protective services on tribal lands.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
Amador County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

**Goal:** Deal/continue to deal with impacts as a result of realignment and provide a fluid response to those impacts

**Objective:**
- Supervision of offenders
- Ensure jail beds are used for those offenders presenting the highest risk
- Ensure evidence-based programming (EBP) is available

**Measure:**
- All offenders supervised by agency responsible for supervision
- Amador County Sheriff has access to use contract jail beds when needed/warranted
- All offenders have access to EBP

**Progress:** No offenders have gone unsupervised, been released from custody "early" and EBP is available

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Service Type</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Custody Services (jail beds)</td>
<td>$130,000</td>
<td>$135,000</td>
</tr>
<tr>
<td>GPS/Electronic Monitoring Services</td>
<td></td>
<td>$30,000</td>
</tr>
<tr>
<td>Drug &amp; Alcohol Testing</td>
<td></td>
<td>$5,000</td>
</tr>
<tr>
<td>Local Community Corrections</td>
<td></td>
<td>$982,783</td>
</tr>
<tr>
<td></td>
<td>$1,008,290</td>
<td></td>
</tr>
</tbody>
</table>

Note: The CCP budgets funding based on need and does not "allocate" funds to any one department. The budget sits outside of any one department, but the Probation Department is responsible for the budget. The county maintains its initial implementation budget as a base and allocates money each year based on needs above and beyond that base.

FY 2014-15 and 2015-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Out-of Custody Beds</td>
<td></td>
<td>$100,000</td>
</tr>
<tr>
<td>Drug &amp; Alcohol Testing</td>
<td></td>
<td>$5,000</td>
</tr>
<tr>
<td>GPS/Electronic Monitoring Services</td>
<td></td>
<td>$30,000</td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-Custody Services (jail beds)</td>
<td></td>
<td>$100,000</td>
</tr>
</tbody>
</table>

FY 2014-15 and 2015-16 Allocations to Non-Public Agencies for Programs & Services

- FY 2014-15, $10,000 allocated to Drug Testing
- FY 2015-16, $5,000 allocated to sober living beds
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, various agencies keep the agreed upon data and provide said data to the CCP.

Does the county consider evaluation results when funding programs and/or services?

Yes, the CCP considers that data if/when funding is requested.

Does the county use BSCC definitions when collecting data? If so, which?

No.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%. The Community Corrections budget funds 1 full-time employee (FTE) at the Behavior Health Department to provide evidence-based programming. The cost for that FTE is $ 84,298.98.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Moral Reconciliation Therapy™, Thinking for a Change (T4C) and the Matrix Alcohol and Drug programming are all provided to offenders if/when needed/warranted.

What challenges does your county face in meeting these programming and service needs?

Service providers (COBs) are needed. Providing the programming outlined in question (see prior response) needs to be done in a custodial setting. However, due to the age of the current jail, this is not possible.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The CCP has started the Workforce Assistance Placement Program (WAPP) with the intent of removing barriers to employment. Key program components include:

- WAPP participants, if they complete the program, will become employable ready as an entry level Public Works worker
- The length of the program is 90 days. WAPP case managers (officers, Mother Lode Job Training staff and Public Works lead workers) will have the ability to keep participants an additional 30-90 days
- The maximum length of the program is 6 months per participant
- Participants will be assessed by the Public Works Team Leader every 30 days. Those assessments can/will be shared with the WAPP case managers
- Upon successful completion and concurrence of the case managers, participants can earn work boots, pants and outer clothing as a reward thus further enhancing participants future employability
## Butte County

### Goals, Objectives, Outcome Measures and Progress

#### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Provide effective supervision and programming to Post-Release Community Supervision (PRCS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>100% of the offenders will be assessed to determine their individual needs and follow-up with appropriate referrals</td>
</tr>
<tr>
<td></td>
<td>100% of participants will be supervised according to their needs and risk</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Number of offenders released into the community</td>
</tr>
<tr>
<td></td>
<td>Number of offenders completing their period of supervision</td>
</tr>
<tr>
<td></td>
<td>Number of offenders sustaining subsequent arrests and/or convictions</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>As of December 1, 2015, 365 PRCS offenders were on supervision in Butte County, with 23.6% in warrant status. In FY 2014-15, 240 PRCS offenders were released onto supervision. During that same period, 84 PRCS offenders were successfully discharged from supervision.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Provide effective supervision and programming to Mandatory Supervision (MS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>100% of the offenders will be assessed to determine their individual needs and follow-up with appropriate referrals</td>
</tr>
<tr>
<td></td>
<td>100% of participants will be supervised according to their needs and risk</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Number of offenders released into the community</td>
</tr>
<tr>
<td></td>
<td>Number of offenders completing their period of supervision</td>
</tr>
<tr>
<td></td>
<td>Number of offenders sustaining subsequent arrests and/or convictions</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>As of December 1, 2015, 93 MS offenders were on supervision in Butte County, with 22.6% in warrant status. In FY 2014-15, 55 MS offenders were released onto supervision. During that same period, 24 MS offenders were successfully discharged from supervision.</td>
</tr>
</tbody>
</table>
**Goal:** Provide effective supervision and programming to Alternative Custody Supervision (ACS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism

**Objective:**
- 100% of the offenders will be assessed to determine their individual needs and follow-up with appropriate referrals
- 100% of participants will be supervised according to their needs and risk

**Measure:**
- Number of offenders released into the community
- Number of offenders completing their period of supervision
- Number of offenders sustaining subsequent arrests and/or convictions

**Progress:** As of December 1, 2015, 76 ACS offenders were on supervision in Butte County. In FY 2014-15, 230 ACS offenders were released to supervision. During that same period, 115 ACS offenders were successfully discharged from supervision. Between 10/1/11 and 11/11/15, 111 ACS offenders were rearrested (including escapes) while in the program.

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*

**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Attorney</td>
<td>$45,636</td>
<td></td>
</tr>
<tr>
<td>Employment and Social Service</td>
<td>$74,512</td>
<td>$174,619</td>
</tr>
<tr>
<td>Sheriff Department</td>
<td></td>
<td>$3,808,135</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$3,722,844</td>
</tr>
<tr>
<td>Department of Behavioral Health</td>
<td>$865,553</td>
<td>$1,553,660</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$2,203,374</td>
<td>$1,819,870</td>
</tr>
</tbody>
</table>

*FY 2015-16 - $6,997,210  FY 2014-15 - $7,270,993*
### FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Service Description</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education Services</td>
<td>$23,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>Residential/ADF/Emergency Housing Services (BH)</td>
<td>$434,500</td>
<td>$327,000</td>
</tr>
<tr>
<td>Medical/Medication Services (BH)</td>
<td>$50,740</td>
<td>$129,784</td>
</tr>
<tr>
<td>Mental Health/Counseling Services (BH)</td>
<td>$861,321</td>
<td>$839,935</td>
</tr>
<tr>
<td>Employment/Veteran Services (DESS)</td>
<td>$74,512</td>
<td>$174,619</td>
</tr>
<tr>
<td>Day Reporting Center (SO)</td>
<td>$471,275</td>
<td>$597,000</td>
</tr>
<tr>
<td>Bus Passes (BH/SO/Prob)</td>
<td>$24,300</td>
<td>$32,001</td>
</tr>
<tr>
<td>GPS/RF Services (SO/Prob)</td>
<td>$411,000</td>
<td>$506,276</td>
</tr>
<tr>
<td>PRCS/Mandatory Supervision Services (Prob)</td>
<td>$850,876</td>
<td>$839,072</td>
</tr>
<tr>
<td>Alternative Custody Supervision Services (SO)</td>
<td>$791,161</td>
<td>$856,307</td>
</tr>
</tbody>
</table>

BH=Behavioral Health. SO=Sheriff’s Office. Prob=Probation Department. DESS=Department of Employment and Social Services

### FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

Butte County does not directly allocate funding to non-public agencies for programs and services. However, once funds are allocated to the public agencies, services are subcontracted out to non-public agencies to provide programs to the realignment population. For example, Residential Substance Abuse Treatment, Sober Living Housing, Day Reporting Center Services, etc.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No, only the CCP and Probation Department evaluate the effectiveness of the programs and/or services provided and funded by the County's Public Safety Realignment allocation.

Does the county consider evaluation results when funding programs and/or services?

No, although Chico State University has done a study on impacts of AB 109 in Butte County, specific evaluations regarding program effectiveness have not been completed.

Does the county use BSCC definitions when collecting data? If so, which?

No.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Assessment services, alternative supervision services, Post-Release Community and Mandatory Supervision services, GPS/EMP services, mental health/psychiatric assessment and counseling services, drug and alcohol assessment and counseling services, residential drug and alcohol services, wrap around services, Cognitive Behavioral Therapy services, employment/veteran and case management services, public assistance services, medical/medication services, housing services, education services, Day Reporting Center services, Community Outreach Center services, drug testing services, transportation services, clothing and food services, victim witness services, and community clean-up services

What challenges does your county face in meeting these programming and service needs?

The Butte County CCP has continued offering outstanding service and program delivery with the funding provided in our allocation. However, additional funding is always needed to expand service delivery options (extending housing, treatment etc.).

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Co-locating service providers at the Day Reporting Center, Community Outreach Center and Probation Department has helped to streamline service referral delivery among our realignment population.
<table>
<thead>
<tr>
<th>Community Corrections Partnership Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td>(November 2, 2015)</td>
</tr>
</tbody>
</table>

**Calaveras County**

**Goals, Objectives, Outcome Measures and Progress**

**FY 2014-15**

**Goal:** Redesign the Day Reporting Center (DRC) to improve treatment options and overall public safety

**Objective:**
- Implement and/or improve Courage to Change, Moral Reconation Therapy™ and Seeking Safety with greater fidelity by hiring two new clinicians and training the deputy probation officers
- Extend clinical services and Cognitive Behavioral Treatment groups into the jail for effective re-entry programming by the end of 2014-2015

**Measure:**
- Average daily population
- Completion rates at the DRC

**Goal:** Continue to improve communications and real time information exchanges among law enforcement, probation and health and human services partners essential to the success of the DRC and public safety

**Objective:**
- Continue the monthly Post-Release Community Supervision (PRCS) meetings and email exchanges to communicate the status and progress of offenders to all stakeholders

**Measure:**
- Monthly PRCS meetings and email exchanges to communicate the status and progress of offenders to all stakeholders

**Goal:** Support workforce training and educational opportunities for AB 109 population

**Objective:**
- Redesign the DRC as a county-run DRC that will become a greater resource hub for employment and educational resources and training

**Measure:**
- Workforce training and educational programming is offered regularly at the DRC by county personnel

---

**Samuel Leach**
Chief Probation Officer

**Grant Barrett**
Presiding judge or designee

**Shirley Ryan**
County supervisor or chief administrative officer or designee

**Barbara York**
District Attorney

**Scott Gross**
Public Defender

**Gary Kuntz**
Sheriff

**Todd Fordahl**
Chief of Police

**Mary Sawicki**
Department of Social Services, Department of Mental Health, Department of Employment and Alcohol and Substance Abuse Programs

**Kathy Northington**
Office of Education

**Vacant**
Community-based organization

**Kelli Fraguero**
Victims’ interests

The CCP meets bi-monthly
**Goals, Objectives, Outcome Measures and Progress FY 2015-16**

<table>
<thead>
<tr>
<th>Goal: Program evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong> The CCP will evaluate the impact of evidence-based programming on re-arrest rates and risk of recidivism</td>
</tr>
<tr>
<td><strong>Measure:</strong> Impacts of evidence-based programming on re-arrest rates and risks of recidivism</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Continue to implement and improve evidence-based programming</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong> The DRC and the Jail Re-entry Program will become fully staffed during the 2015-2016 fiscal year. The CCP will focus on training, program fidelity and comprehensive delivery of services</td>
</tr>
<tr>
<td><strong>Measure:</strong> Staffing levels should reach 100% prior to June 30, 2016 and staff should receive evidence-based programming training</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Coordinate services for victims</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong> The District Attorney's Office, in coordination with the CCP, will hire a Program Coordinator for victim services. This position will assist with restorative justice efforts to increase offender accountability and make victims whole again</td>
</tr>
<tr>
<td><strong>Measure:</strong> Successful recruitment for the Program Coordinator position and a functional restorative justice program by June 30, 2016</td>
</tr>
</tbody>
</table>
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Service Type</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Resource Connection (Housing Assistance)</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
<tr>
<td>Public Agencies</td>
<td>$495,109</td>
<td>$495,109</td>
</tr>
<tr>
<td>Substance Abuse Residential Treatment</td>
<td>$14,000</td>
<td>$14,000</td>
</tr>
<tr>
<td>Anger Management &amp; Domestic Violence</td>
<td>$20,000</td>
<td>$20,000</td>
</tr>
<tr>
<td>Moral Reconciliation Therapy™</td>
<td>$197,790</td>
<td>$197,790</td>
</tr>
<tr>
<td>Victim Services</td>
<td>$2,650</td>
<td>$2,650</td>
</tr>
<tr>
<td>Homeless Assistance</td>
<td>$2,500</td>
<td>$2,500</td>
</tr>
</tbody>
</table>

*Domestic Violence, **Cognitive Behavioral Therapy, ***Day Reporting Center, ****to fund balance

FY 14-15 and 15-16 Allocations Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Service Type</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unallocated****</td>
<td>$34,123</td>
<td>$34,123</td>
</tr>
<tr>
<td>Incarceration</td>
<td>$20,000</td>
<td>$20,000</td>
</tr>
<tr>
<td>Education</td>
<td>$29,130</td>
<td>$29,130</td>
</tr>
<tr>
<td>Anger Management/ DM*</td>
<td>$20,000</td>
<td>$20,000</td>
</tr>
<tr>
<td>Alternative Sentencing</td>
<td>$101,586</td>
<td>$101,586</td>
</tr>
<tr>
<td>Non-Public Programs &amp; Services</td>
<td>$16,500</td>
<td>$16,500</td>
</tr>
<tr>
<td>Housing Parolees in County Jail</td>
<td>$20,000</td>
<td>$20,000</td>
</tr>
<tr>
<td>Electronic Monitoring</td>
<td>$107,947</td>
<td>$107,947</td>
</tr>
<tr>
<td>Data Collection &amp; Analysis</td>
<td>$161,655</td>
<td>$161,655</td>
</tr>
<tr>
<td>DRC***</td>
<td>$33,970</td>
<td>$33,970</td>
</tr>
<tr>
<td>Jail Re-entry</td>
<td>$262,780</td>
<td>$262,780</td>
</tr>
<tr>
<td>Transportation</td>
<td>$24,330</td>
<td>$24,330</td>
</tr>
<tr>
<td>Adult Literacy</td>
<td>$18,308</td>
<td>$18,308</td>
</tr>
<tr>
<td>Supervision</td>
<td>$237,573</td>
<td>$237,573</td>
</tr>
<tr>
<td>Training</td>
<td>$240,308</td>
<td>$240,308</td>
</tr>
<tr>
<td>Inmate Medical Insurance</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>CBT**</td>
<td>$13,421</td>
<td>$13,421</td>
</tr>
<tr>
<td>Substance Abuse Counseling</td>
<td>$48,663</td>
<td>$48,663</td>
</tr>
<tr>
<td>Individual &amp; Group Therapy</td>
<td>$173,545</td>
<td>$173,545</td>
</tr>
<tr>
<td>Restorative Justice</td>
<td>$75,908</td>
<td>$75,908</td>
</tr>
</tbody>
</table>

*Domestic Violence, **Cognitive Behavioral Therapy, ***Day Reporting Center, ****to fund balance
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, an evaluation is currently in progress and details will be available in a future fiscal year.

Does the county consider evaluation results when funding programs and/or services?

Yes, an evaluation is currently in progress and will be considered when funding programs and services in future fiscal years.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Alternative Sentencing: in lieu of incarceration, offenders qualifying for alternative sentencing may be placed on home detention or additional alternative sentencing programs including attending the Day Reporting Center, electronic monitoring or a work program.

The Probation Department, with input from the Calaveras County Sheriff’s Department and the Angels Camp Police Department, will identify members of the Post-Release Community Supervision (PRCS) population and County Jail inmates who qualify for one or more of the alternative sentencing strategies.

Anger management and domestic violence programs at the Day Reporting Center are facilitated by a certified professional. While participating in the program, offenders develop the skills necessary to regulate emotions and learn to communicate in a relationship in a healthy and productive manner.

Cognitive Behavioral Therapy (CBT) has been embraced by the CCP as a viable treatment method for individuals with criminal histories. Calaveras County has implemented three CBT programs: Moral Reconation Therapy (MRT™), Changing Offender Behavior and The Courage To Change. CBT groups take place at the Day Reporting Center for high-risk offenders on supervision and in the Calaveras Jail for inmates.

MRT™ is a Cognitive Behavioral Counseling program that combines education, group and individual counseling, and structured exercises designed to foster moral development in treatment-resistant offenders. The program is designed to alter how offenders think, make judgments about what is right and wrong, and what to do in a given situation.

Changing Offender Behavior (COB) is a Cognitive Behavioral, evidence-based program that helps offenders recognize and practice responsible behavior.
Courage To Change is a Cognitive Behavioral interactive journaling system designed to help offenders address their individual problem areas within the criminogenic needs identified by the Ohio Risk Assessment System (ORAS) assessment tool. By personalizing the information presented in the journals to their own circumstances, offenders develop a roadmap to success in their efforts to change.

Education: Offenders without a high school diploma qualify for General Education Development (GED) assistance. The GED test in California is now a computer-based exam rather than a traditional paper-based exam. The CCP has opted to purchase a computer system which replicates current exam conditions for offenders choosing to study for the GED test. Adult tutors are readily available to custom-tailor assistance to an offender’s educational needs. Once an offender has successfully prepared for the GED test, the CCP has set aside funding to cover the cost of administering the exam and receiving a California High School Equivalency Certificate. The Calaveras CCP education program also includes a personal finance program through Hands On Banking. The personal finance program offers the necessary tools and skills for offenders to succeed in building their credit, opening a small business, investing in the market, purchasing a home, creating a sustainable budget and many other areas of personal finance. The CCP education program is offered at the Day Reporting Center for high-risk offenders on supervision and in the Calaveras Jail for inmates.

Housing: The CCP has implemented a housing program for high-risk homeless offenders. Offenders with no where to stay are provided up to six months of housing until they are able to secure housing of their own. Obstacles preventing the offender from obtaining permanent housing are identified and a plan to overcome those obstacles is developed.

Incarceration: Calaveras County is responsible for housing inmates who would have been sentenced to state prison prior to realignment. To supervise these inmates, the CCP has two correctional officers in the county jail and provides financial support to offset the additional costs.

Job Skills: Most jobs today require working with computers. Offenders who have never owned or used a computer can begin learning the basics of computer operations and, once prepared, learn to use standard office software. The job skills program is transitioning from using Key Blaze typing software to a more comprehensive computer education system purchased through Essential Education. Assistance with preparing resumes is available including how to avoid common resume mistakes, how to format a resume, sample resumes and help with preparing their resume. The importance of cover letters and how to effectively utilize them is shared with offenders on an individual basis. Prior to obtaining employment, trained staff assist with interview skills including how to handle questions about their past, proper interview attire and behavior, punctuality, and what to expect during the interview process. The CCP job skills program is offered at the Day Reporting Center for high-risk offenders on supervision and in the Calaveras Jail for inmates.

Medical Insurance: Inmates who require hospitalization due to medical emergencies or life-threatening illnesses are covered by Catastrophic Inmate Medical Insurance. The CCP provides this insurance due to the increased risk of medical costs associated with longer county jail sentences.

Mindfulness Meditation: Mindfulness meditation has been embraced by the Department of Veterans Affairs to reduce Post-Traumatic Stress Disorder symptoms. The Day Reporting Center currently offers one mindfulness meditation course per week.

Parenting Skills: The Parent Project is a program designed to assist parents with out of control juveniles. Offenders who have out of control children are taught behavioral modification techniques to effectively control their children, thereby reducing family stress and allowing for the offender’s own successful recovery.

Post-Supervision: After supervision ends, probation officers keep in contact with previous offenders to assist with overcoming obstacles that might arise due to living a non-criminal lifestyle.
Post-supervision offenders are encouraged to continue to participate in the education and job skills programs to ensure successful re-entry.

Restorative Justice: The CCP is exploring options for implementing a comprehensive restitution collection system including collecting restitution from inmates and enforcing post-incarceration collections. A full time Program Coordinator position has been created to assist with the Restorative Justice program.

Substance Abuse: Substance abuse continues to be problematic for many offenders. The CCP has hired a Substance Abuse Counselor to provide individual treatment and to lead group sessions at the Day Reporting Center for high-risk offenders. If a trained professional determines that an offender requires residential treatment to overcome substance abuse, several providers are available throughout the state. An updated list of residential treatment providers is maintained to best match the unique needs of the offender to the available services. In addition to residential treatment and counseling, the CCP has partnered with multiple local sober living homes to provide a safe, effective transition to sobriety.

Transportation: Lack of adequate transportation was identified as a problem for many offenders. For this reason, the CCP provides bus passes for travel throughout the county. If bus transportation is not possible due to route coverage or lack of adequate arrival/departure times, transportation is provided by a Probation Aide.

What challenges does your county face in meeting these programming and service needs?

Calaveras is a rural county with towns that are isolated from one another. Lack of adequate transportation is the primary obstacle many offenders must overcome to participate in services. The CCP has helped offenders overcome this obstacle by devoting a portion of the annual allocation to transportation.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Services at the Day Reporting Center were originally provided by a private vendor. Calaveras County chose to hire two licensed clinicians and two probation officers rather than renew the contract with the vendor. The cost is comparable even though services are offered at a higher level than what was provided by the vendor.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
## Colusa County

### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th><strong>Goal:</strong></th>
<th>Continue use of Moral Reconciliation Treatment™ (MRT™) (cognitive intervention around criminal thinking) in-custody and Day Reporting Center (DRC)</th>
</tr>
</thead>
</table>
| **Objective:** | • Enroll all eligible AB 109 probationers into MRT™ within the first month they are out-of-custody, thereby reducing recidivism by 40%  
  • Assist all AB 109 probationers who require assistance (i.e., bus passes), and offer a variety of classes scheduled on various days and times to achieve 100% attendance  
  • Achieve 80% graduation rate for all enrolled MRT™ participants |
| **Measure:** | • Number of probationers enrolled in MRT™  
  • Graduation rate  
  • New convictions |
| **Progress:** | • 69 probationers were enrolled in MRT™ in FY 2014-15, 12 graduated the program and there were no new convictions of MRT™ graduates  
  • Incentives are varied class schedules that produced a 82% attendance rate  
  • Of the 69 probationers enrolled in MRT™ (minus the 12 graduates) 54 of the remaining 57 continued attending MRT™ without a new conviction |

**Goal:**

Provide In-custody (jail) and out-of-custody (DRC) mental health services to all of the AB 109 clients in Colusa County

| **Objective:** | All AB 109 clients will be assessed by a mental health professional and provide with appropriate services  
  • Provide assessed and documented mental health services to those clients who require individual and/or group counseling, medication management, Substance Abuse Program, etc. |
| **Measure:** | • Number of clients seen and assessed for mental health needs/services |
| **Progress:** | • 56 clients, or 100%, were seen and assessed for mental health needs/services at the jail or DRC  
  • 366 mental health contacts were completed at the jail and DRC and appropriate services provided based on each individual’s assessment |
**Goal:** Refer and provide employment assistance and education programs to all AB 109 clients in-custody or at the DRC

**Objective:**
- Provide online GED courses to all eligible clients
- Assist all eligible clients in the completion of resumes, how to answer interview questions and referrals to available jobs

**Measure:**
- Number of clients completing online GED courses
- Number of clients completing job resumes

**Progress:**
- One AB 109 client completed his GED out of the 37 working on online courses. 36 continue to complete courses
- 20 of the 37 clients completing job resumes and actively searching for employment found jobs. One client was enrolled in a welding class and 5 other clients obtained employment in August and September 2015

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- District Attorney: $82,542
- Behavioral Health Department: $74,722
- Sheriff Department: $252,038
- Probation Department: $591,178

FY 2015-16 - $1,179,315
FY 2014-15 - $1,000,480

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- GPS/Electronic Monitoring: $1,000
- Mental Health Services In-Custody & Day Reporting Center: $78,570
- Assistance/Positive Reinforcement Incentives: $12,500
- Education In-Custody & Day Reporting Center (Office of Education & Colusa One Stop): $29,000

FY 2015-16: $121,070
FY 2014-15: $124,722

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15 and 2015-16 $15,000 was allocated to Colusa One Stop

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Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No, only the CCP and Probation Department evaluate the effectiveness of the programs and/or services provided and funded by the County's Public Safety Realignment allocation.

Does the county consider evaluation results when funding programs and/or services?

Yes, the CCP has considered results and the County Board of Supervisors has approved the recommended funded programs and services based on outcomes.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Primarily only available through the County Behavioral Health Department.

What challenges does your county face in meeting these programming and service needs?

Lack of appropriate community-based organizations (CBO's), services, phone access and transportation for this clientele population.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Implementation of the DRC and partnering with Health and Human Services, Behavioral Health, Sheriff, District Attorney, Public Defender and Court to provide the appropriate offender needs to this clientele (i.e. cognitive interventions, education, substance abuse, mental health, employment assistance, etc.).

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Adding the Thinking for Good for those clients who are not able to work at the Moral Reconciliation Therapy™ level, and the Staying Quit Programs at the Day Reporting Center, which are both evidence-based programs.
Community Corrections Partnership Membership
(November 2, 2015)

Philip Kader
Chief Probation Officer

Mim Lyster-Zemmelman
Presiding judge or designee

David Twa
County supervisor or chief administrative officer or designee

Mark Peterson
District Attorney

Robin Lipetzky
Public Defender

David Livingston
Sheriff

Brian Addington
Chief of Police

Kathy Gallagher
Department of Social Services

Cynthia Belon
Department of Mental Health

Stephan Baiter
Department of Employment

Fatima Matal Sol
Alcohol and Substance Abuse Programs

Lynn Mackey
Office of Education

Roosevelt Terry
Community-based organization

Deborah Levine
Victims’ interests

The CCP meets bi-monthly

Contra Costa County

The CCP did not provide goals for FY 2014-15 or 2015-16

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Public Defender</td>
<td>$138,002</td>
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<tr>
<td>Contracted Community Programs</td>
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<td>Pre-Trial Blended Revenue - Probation</td>
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<td>County Administrator</td>
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<td>Workforce Development Board</td>
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<td>Employment &amp; Human Services</td>
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<td>Public Defender</td>
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<td>Health Services</td>
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<td>Behavioral Health</td>
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<td>Probation</td>
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<tr>
<td>Sheriff</td>
<td>$6,786,564</td>
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FY 2014-15 Allocation: Additional carry-over funds used
FY 2015-16 Allocation: Additional funds put in carry-over fund
### FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
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<tbody>
<tr>
<td><strong>Health Services--Detention Health Division</strong></td>
<td>$1,055,562</td>
<td>$1,055,562</td>
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<td><strong>Health Services--Behavioral Health Division</strong></td>
<td>$1,538,924</td>
<td>$1,536,302</td>
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<td><strong>District Attorney</strong></td>
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<td><strong>Public Defender</strong></td>
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<td><strong>Sheriff</strong></td>
<td>$306,092</td>
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<tr>
<td><strong>Probation</strong></td>
<td>$900,000</td>
<td>$900,000</td>
</tr>
</tbody>
</table>

**FY 2014-15:** Probation (Pre-Trial Services Program $900,000) Sheriff (Behavioral Health Court $304,642) Public Defender (Arraignment Court—Early Representation/Resolution Program $655,000, Clean Slates Services $92,000) District Attorney (Arraignment Court-Early Representation/Resolution Program $705,383, Victim Witness Assistance Program $275,797) Health Services - Behavioral Health Division (Homeless Programs $232,900, Forensic Mental Health Services $1,215,797, Alcohol & other Drug Services $87,635) Health Services - Detention Health Services (In-Custody Health Services $1,055,562)

**FY 2015-16:** Probation (Pre-Trial Services Program $900,000) Sheriff (Behavioral Health Court $306,092) Public Defender (Arraignment Court—Early Representation/Resolution Program $655,000, Clean Slates Services $92,000) District Attorney (Arraignment Court - Early Representation/Resolution Program $525,248) Health Services - Behavioral Health Division (Homeless Programs $238,084, Forensic Mental Health Services $1,210,575, Alcohol & other Drug Services $90,265) Health Services - Detention Health Services (In-Custody Health Services $1,055,562)
FY 2014-15: Employment (Rubicon $1,400,000, Goodwill Industries $600,000) **One Stop Center** (Re-entry Success Center—Rubicon $400,000) **Re-entry Services** (Network System of Services $800,000) **Mentoring & Family Reunification** (Men & Women of Purpose $66,667, Center for Human Development $66,667, Brighter Beginnings $66,666)

FY 2015-16: Employment (Rubicon $1,400,000, Goodwill Industries $600,000) **One Stop Center** (Re-entry Success Center—Rubicon $400,000) **Re-entry Services** (Network System of Services $800,000) **Mentoring & Family Reunification** (Men & Women of Purpose $110,000, Center for Human Development $90,000)
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, outside contracted services through "Research and Development Associates" provide a wide cross section of data and service delivery through county agencies and contracted community-based organizations.

Does the county consider evaluation results when funding programs and/or services?

No formal evaluations of programs are implemented however there are ongoing discussions of programs/services effectiveness.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

We offer services through both county agencies and contracted services. Our data showed we were receiving the best results from our mental health, alcohol and other drugs and our housing programs. Data indicates that those participating in at least one of those services did better and those who were engaged in all three services did the best. There were other services that either showed promising and/or effective services such as but not limited to: mentoring, lawyer support for retention and/or regaining driver licenses, family reunification, education and vocation training, job placement as well as cognitive programming such as Thinking for a Change.

What challenges does your county face in meeting these programming and service needs?

There continues to be difficulty to find a methodology to engage those returning citizens that are uninterested in participating or believe they do not need assistance. We also have been challenged to ensure our clients interested in services can find them in their specific communities.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We began with a very strong commitment to engage the community and continue to work hard to do so. We believe that has assisted us in building trust while continuing to enhance our service delivery system. We have also enhanced our relationship with local law enforcement so that we can collaborate in our supervision responsibilities and develop and enhance our trust in the system of care we have developed in our communities.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
The CCP did not provide goals for FY 2014-15 or 2015-16

**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

- **Public Defender**
  - FY 2015-16: $10,000
  - FY 2014-15: $10,000

- **District Attorney**
  - FY 2015-16: $10,000
  - FY 2014-15: $10,000

- **Mental Health**
  - FY 2015-16: $88,500
  - FY 2014-15: $20,000

- **Alcohol & Other Drug Services**
  - FY 2015-16: $512,906
  - FY 2014-15: $148,738

- **Sheriff's Office**
  - FY 2015-16: $585,574
  - FY 2014-15: $659,826

- **Probation**
  - FY 2015-16: $88,500
  - FY 2014-15: $10,000

**Del Norte County**

**Community Corrections Partnership Membership**
(November 2, 2015)

- **Lonnie Reyman**
  - Chief Probation Officer

- **Sandra Linderman**
  - Presiding judge or designee

- **Jay Sarina**
  - County supervisor or chief administrative officer or designee

- **Dale Trigg**
  - District Attorney

- **Rebecca Linkous**
  - Public Defender

- **Erik Apperson**
  - Sheriff

- **Ivan Minsal**
  - Chief of Police

- **Barbara Pierson**
  - Department of Social Services, Department of Mental Health and Alcohol and Substance Abuse Programs

- **Vacant**
  - Department of Employment

- **Vacant**
  - Office of Education

- **Vacant**
  - Community-based organization

- **Vacant**
  - Victims’ interests

The CCP meets quarterly
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Mental Health
- Sheriff's Office
- Housing
- County Drug & Alcohol Services/Mental Health
- Electronic monitoring

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No local definitions have been agreed upon.

Does the county consider evaluation results when funding programs and/or services?

No formal evaluation of programs is implemented, however there are ongoing discussions of program/services effectiveness.

Does the county use BSCC definitions when collecting data? If so, which?

No.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

20% or less. No local definition of evidence-based programming (EBP) has been agreed upon. Some EBP that has been implemented is risk/needs assessments & high-risk supervision by Probation, Moral Reconciliation Therapy™ (MRT™) by Mental Health and programming by Alcohol and Other Drug Services.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Limited at best.

What challenges does your county face in meeting these programming and service needs?

The county lacks resources and funding to bring in resources because of the isolated nature of the county. There is great difficulty in attracting high quality providers of any services. There are very limited alternative housing options because of the isolated nature of the county and the limited population. Most services are provided by county governmental agencies or funded through them and the same challenges are faced by county agencies in attracting and retaining qualified personnel to not only establish but maintain sustainability of programs and services.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
### Community Corrections Partnership Membership

(November 2, 2015)

**Brian J. Richart**  
Chief Probation Officer

**Jackie Davenport**  
Presiding judge or designee

**Laura Schwartz**  
County supervisor or chief administrative officer or designee

**Vern Pierson**  
District Attorney

**Teri Monterosso**  
Public Defender

**John D’Agostini**  
Sheriff

**Scott Heller**  
Chief of Police

**Don Ashton**  
Department of Social Services, Department of Mental Health and Alcohol and Substance Abuse Programs

**Vacant**  
Department of Employment

**David Publicover**  
Office of Education

**Vacant**  
Community-based organization

**Vacant**  
Victims’ interests

The CCP meets semi-annually or more often as needed

### El Dorado County

#### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Provide effective supervision and programming to the Community Corrections Center (CCC) offenders that ensures public safety and uses evidence-based practices in reducing recidivism</th>
</tr>
</thead>
</table>
| Objective: | • 100% of offenders will be assessed to determine their individual need and reassessed at the start of each phase of the CCC  
• 100% of offenders will be supervised according to their needs and risk level |
| Measure: | • Number of offenders accepted into the CCC  
• Number of offenders completing their period of supervision  
• Number of offenders convicted of subsequent felonies |

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Use Moral Reconciliation Treatment™ (MRT™) at the CCC</th>
</tr>
</thead>
</table>
| Objective: | • Enroll all CCC accepted referrals into MRT™ within the first month they are accepted  
• Achieve an 80% graduation rate for MRT™ at the CCC |
| Measure: | • Number of all accepted referrals into MRT™ and days in between the accepted date and the start date of MRT™  
• Number of graduates from MRT™ |

*The CCP did not provide goals for FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

An additional $547,375 in carry-over funds was used in the FY 2014-15 budget.

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15, the CCP did not allocate realignment funds to non-public agencies
- In FY 2015-16 $109,974 was allocated to Data Consulting Services
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Not at this time, however, it is the intent of the CCP agencies to become able to evaluate and/or contract out for the evaluation of our local program/services effectiveness.

Does the county consider evaluation results when funding programs and/or services?

Not applicable at this time.

Does the county use BSCC definitions when collecting data? If so, which?

El Dorado County has adopted the BSCC definition of recidivism. The additional definitions approved by BSCC during the September 2015 Board Meeting will be used in El Dorado County data collection practices.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The Community Corrections Center (CCC): creates a one stop shop for the high-risk probation offenders in the El Dorado County community. The CCC is designed to provide intensive treatment options. Below is a list of available services:

Mental Health: Assessments, case management, short-term individual counseling (Cognitive Behavioral Therapy programs), psychiatric evaluations, medication management, referrals to other county agencies

Alcohol and Drug Services: Comprehensive substance use disorder assessment, comprehensive case management, individual counseling, substance use disorder treatment groups, Moral Reconciliation Therapy™

Public Health Nursing: Infant/child, adult and family assessment and intervention, medication management education and monitoring, referral/coordination to specialty and prevention health, including dental services

Public Guardian: case management services, eligibility/benefits/application assistance to county programs, prescription medications, rehabilitation and support groups, housing and transportation, 24-hr crisis hotline, budgeting and money management, federal lifeline assistance, family and senior services, general assistance, health education and food services, income assistance (Social Security Assistance/Social Security Income/Veteran’s Affairs), reduced fee identification cards

Education: High school diploma, GED, basic reading, writing, vocational/enrichment
Jail: There are hybrid versions of prior mentioned services. One of the main goals of the Jail services through Health and Human Services is actively promoting, educating and assisting inmates with their Health Care Options while incarcerated. Inmates can access services through a direct referral process or an inmate self-directed referral process.

What challenges does your county face in meeting these programming and service needs?

One of the biggest challenges to El Dorado County is housing and transportation.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Community Corrections Center (CCC) and Jail services described in Question 24 are promising and anecdotally have shown positive results. However, a more thorough analysis is in process to ensure empirically this program and services are having an impact in reducing recidivism and future victimization.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The CCC and Jail services described above are promising and anecdotally have shown positive results. However, a more thorough analysis is in process to ensure empirically this program and services are having an impact in reducing recidivism and future victimization.
The CCP did not provide goals for FY 2014-15.

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Continue hiring practices and training of staff to meet the adopted ratios in the 2011 CCP Implementation Plan

Objective: • The department will hold quarterly job recruitments for the deputy probation officer (DPO) classification until the positions are adequately filled
• Revised DPO job specifications from requiring a Bachelor’s degree in criminology, social work, sociology or closely related field, to accepting a Bachelor’s degree in any field
• Recruit through job fairs; accept applications from undergraduates with a condition that a copy of their Bachelor’s degree and transcripts are provide upon a formal job officer

Measure: • Number of DPOs that have been hired

Progress: • From July 2015 to December 2015, 19 permanent and extra-help DPOs have been hired
• Supervision ratios of 1 to 50

Goal: Create specialized caseloads for domestic violence, sex offender and mental health populations

Objective: • Modify the current CCP Plan (3rd update 2014) for the specialized caseloads by enhancing the supervision needs of three separate designed types of offenders
• Move away from strictly caseload standard that is based on the number of offenders an officer can effectively supervise
• Request funding to establish a fourth AB 109 Unit for this specialized unit that will consist of one Probation Services Manager (PSM), three Deputy Probation Officer IV’s, seven Deputy Probation Officer I-III’s, two Probation Technicians and one Office assistant

Measure: • Updated CCP plan
• Supervision ratios

Progress: • Funding was granted however this is an ongoing goal as the department works towards filling positions in the DPO classification
• Supervision ratios of 1 to 35
Goal: Increase services in the areas of job/vocational employment and transitional housing

Objective:
- Received Request for Proposals (RFPs) from agencies that provide job/vocational employment and transitional housing for the AB 109 population
- Establish committee to review RFPs from agencies that can assist and/or provide services to the targeted population

Measure:
- Contract with an employment agency and transitional housing program

Progress:
- Contracted with America Works of California for the Employment Readiness program. Services are expected to be available in April 2016
- The transitional housing program is an ongoing goal as agencies/organizations that can provide these types of services are currently being sought
- 10% increase in referrals to associated services and 10% increase in the average daily population of transitional housing

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- City of Clovis Police Department: $172,738, $164,911
- City of Reedley Police Department: $196,070, $70,750
- City of Selma Police Department: $161,842, $70,750
- City of Fresno Police Department: $178,838, $176,996
- Public Defender: $347,012, $52,822
- District Attorney: $568,983, $262,167
- Probation: $9,414,591, $7,333,833
- Sheriff: $15,088,750, $13,845,607

FY 2015-16 - $26,128,824  FY 2014-15 - $21,977,836
### FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

#### Employment Readiness Program
- FY 2015-16: $175,000
- FY 2014-15: $175,000

#### Pre-Trial Program
- FY 2015-16: $1,533,874
- FY 2014-15: $844,225

#### Jail Transition Pod
- FY 2015-16: $861,800
- FY 2014-15: $817,596

### FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

#### Court Hearing Notification Services
- FY 2015-16: $20,000
- FY 2014-15: $60,000

#### GPS Electronic Monitoring
- FY 2015-16: $132,044
- FY 2014-15: $113,150

#### Vocational Training
- FY 2015-16: $105,071
- FY 2014-15: $90,520

#### Family Violence Counseling
- FY 2015-16: $203,725
- FY 2014-15: $105,071

#### Substance Abuse/ Mental Health Treatment
- FY 2015-16: $1,888,246
- FY 2014-15: $1,828,246

#### Jail Medical Services
- FY 2015-16: $2,181,467
- FY 2014-15: $2,181,467

#### Inmate Counseling Services
- FY 2015-16: $120,000
- FY 2014-15: $120,000

#### Homeless Transition Beds & Services
- FY 2015-16: $600,000
- FY 2014-15: $600,000

#### Homeless Transition Beds & Services
- FY 2015-16: $5,103,958
- FY 2014-15: $5,139,978

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**FY 2015-16 Total: $2,570,674**

**FY 2014-15 Total: $1,386,821**
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the CCP contracted with Owen Research and Associates to complete a three year evaluation of programs, services and outcomes under the auspices of AB 109. The research group is currently finalizing the report for the second year operation with an expected presentation at the CCP meeting in January of 2016.

Does the county consider evaluation results when funding programs and/or services?

Yes, the county and the probation department are currently establishing modifications to bidding contracts for community-based services in an effort to prioritize a portion of funding for programs that have been identified through the county’s association with the Pew Research Center as most likely to reduce recidivism and generate cost savings. Under consideration is the ability to report and track outcomes and to submit data for evaluation purposes.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism and average daily population.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

20% or less. Fresno County is in the midst of the completion of the Results First Model with the Pew Research Center to identify and invest in effective programs that yield high returns on investment. As part of this initiative, the county is currently doing a program inventory to determine which programs are most effective and cost beneficial.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The county in conjunction with the probation department and public private provider networks is attempting to provide services that in the past have not been available to the offender populations in Fresno County. The probation department in conjunction with the superior court operates a Behavioral Health Court and caseload supervision for specialized services to mentally ill populations meeting the established criteria. The county also has drug courts and caseloads as well as domestic violence courts and caseloads.

In relation to counseling services that have been developed, the SERI (Sierra Educational Regional Institute) provides counseling at both the Fresno County Jail Transition Pod and on field caseloads as well as assessments to offenders. Cognitive Behavioral Therapy is also available at the jail and on community-based organization (CBO) caseloads as part of counseling services. The probation department utilizes the Static Risk and Offender Needs Guide (STRONG) assessment tool for services after identification of needs. Fresno County has established a Full Service Partnership (FSP) for the critically mentally ill with public and private providers with housing for 105 offenders in case management and services. In addition, the county offers homeless beds and transitional services as well as a Day Reporting Center for increased services to the population.
What challenges does your county face in meeting these programming and service needs?

Since the implementation and development of AB 109 in Fresno County, the greatest challenge has been hiring of staff and in particular, peace officers. With the necessary background investigations for peace officer positions for the Fresno County Sheriff's Office and the Fresno County Probation Department the average time to hiring following qualification through testing has grown. It is also necessary that this population have all the requisite training to be able to deal with the widely diverse population and have a good understanding of EBP.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Program development implementation under AB 109 required a paradigm shift for an entire justice system. As such much of what was implemented with AB 109 funding was intuitive or traditional. With the association with the Pew Research Group under the Results First Initiative we will be able to move from intuition to evidence and research that will guide us in future program design. Use of evidence-based practices represents a practical solution to Fresno County’s need to manage the higher than anticipated influx of greater risk, longer stay offenders.

Of note is the research and evaluation plan that is underway that should be able to direct decision making internally as to what works and to use success found in the data to move forward.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Turning Point of Central California in conjunction with the Fresno County Probation Department operates the First Street Center locally. The First Street Center-Full Service Partnership program (FSC-FSP) is a Mental Health Services Act (MHSA) partnership serving approximately 1055 adult individuals at any given time, referred by the County of Fresno AB 109 Probation Department. FSC-FSP provides comprehensive mental health/co-occurring services and works in conjunction with the Fresno County Probation Department to fulfill agreed upon treatment goals. FSC-FSP focuses on client strengths/abilities to successfully gain independence and self-sufficiency in the community with an additional housing component for up to 105 residential beds available. Services are available at First Street Center Outpatient include:

- 24/7 Crisis Response
- Daily Program Rehabilitation/Support
- Intensive Case Management
- Social/Recreational Activities
- Assessment/Treatment Planning
- Individual Therapy, Educational Groups and Peer Support Groups
- Psychopharmalogical Treatment
- Housing Support
- Hospitalization Support, Probation/Court Engagement

The CCP continues to look to the Resources Subcommittee to build additional services and is anticipating additional resource development following the presentation of the Pew Report final analysis and the Owen Research Group second year evaluation.

The goals of the program are to reduce psychiatric hospitalizations, to reduce incarcerations, to reduce homelessness, to increase level of community functioning and to increase education and employment participation for AB 109 offenders.
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Glenn County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

| Goal: Provide effective supervision and programming to Post-Release Community Supervision (PRCS) offenders that ensures public safety and uses evidence-based practices in reducing recidivism |
| Objective: 100% of offenders will be assessed to determine their individual needs and appropriate referrals will be made |
| Measure: 100% of offenders will be supervised based on their risk level and needs |

| Goal: Provide effective supervision and programming to Alternative Custody Supervision (ACS) offenders that ensure public safety and use evidence-based practice in reducing recidivism |
| Objective: 100% of participants of ACS will be supervised based on their risk level and needs |
| Measure: Number of offenders released into the community on ACS |

| Goal: Provide in-custody and outpatient mental health services to AB 109 offenders |
| Objective: Provide AB 109 offenders, who meet the criteria, a mental health diagnosis assessment, individual treatment, medication management, outpatient substance abuse services and/or in-custody mental health support |
| Measure: Number of clients seen at the jail |

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
FY 2014-15: Health and Human Services includes Mental Heath ($122,914), Drug and Alcohol ($31,001) and Offender Resource Center ($26,786). Sheriff includes Alternative Custody Supervision ($253,104) and Sheriff Jail Special Needs ($2,500)/ Probation includes Drug Testing ($2,557) and Electric Monitoring ($6,935)

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Offender Resource/Learning Center: $26,786
- K-9 Program: $23,729
- Sheriff Jail Special Needs: $2,500
- Jail Staff/Alternative Custody Supervision/Pre-trial services: $253,104
- Electric Monitoring: $6,935
- Reserves: $452,324
- Client Support Incentive Program: $15,000
- Drug & Alcohol: $31,001
- Mental Health: $107,914
- Drug Testing: $2,557
- Probation Supervision: $424,308

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15 and 2015-16, $6,000 was allocated to Unity in Recovery Housing.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The County has not yet defined what constitutes effectiveness as it relates to the Public Safety Realignment allocation.

Does the county consider evaluation results when funding programs and/or services?

The CCP will be discussing formal data collection procedures prior to the end of this program year. Once an evaluator has been identified, and the areas to be evaluated are selected, the data collection will cover the span of time from initial implementation to present.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Sheriff: Alternative Custody Supervision, Pre-Trial services
- Health and Human Services: Drug and Alcohol, Mental Health, Eligibility, Assessments, Cognitive Interventions, Life Skills and Anger Management
- Office of Education: Assessments, Success One Charter School where an individual can earn his/her high school diploma or GED
- Probation: Assessments, Electronic Monitoring, Cognitive Interventions
- Child Support System: Assessments to determine if individual qualifies for program to earn their driver's license back on a temporary basis, while making payments towards delinquent child support. Some delinquent child support can be forgiven if individual qualifies.

What challenges does your county face in meeting these programming and service needs?

Lack of community-based organizations that are able to provide services and lack of sober living environments, vocational training and employment placements.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.
Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Developed an adult charter school (Success One) that emphasis attaining a high school diploma, but also allows for GED studies. This program not only engages the AB 109 population, but other adult learners within the community. The Office of Education is able to sustain the program through normal ADA funding sources. Therefore, AB 109 funding can be utilized in other areas.
### Humboldt County

#### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal: Expand in-custody services within the jail (set forth in FY 2013-14)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Approve hiring of additional behavioral health staff to provide Moral Reconciliation Therapy™ (MRT™) and Alcohol and drugs (AOD) services</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• CCP executives have approved funding for additional 2.6 FTE staff</td>
</tr>
<tr>
<td>• Hiring of staff, training in MRT™ and AOD-CBT (alcohol and drugs Cognitive Behavioral Therapy) programming</td>
</tr>
<tr>
<td>• Implementation of MRT™ and AOD groups and assessments within jail</td>
</tr>
<tr>
<td><strong>Progress:</strong> In process of hiring</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Continue to develop interagency data management platform and plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• CCP Executive approval of funding for Phase 2 and 3 of contract with Humboldt State University California Center for Rural Policy (HSU-CCRP)</td>
</tr>
<tr>
<td>• Data workgroup to assist HSU-CCRP in development of data platform and plan</td>
</tr>
<tr>
<td>• Implement data platform and plan with partner agencies</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• CCP executives approved funding for Phases 2 and 3 of data project</td>
</tr>
<tr>
<td>• Data platform and plan agreed upon</td>
</tr>
<tr>
<td>• Development of platform and implementation of finished product</td>
</tr>
<tr>
<td><strong>Progress:</strong> Data workgroup is in process of working with HSU-CCRP to develop and implement platform and plan</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Pilot Equine Assisted Growth and Learning (Horses Help) with AB 109 offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Complete pilot project, assess outcomes/benefits and determine if continuation supported</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• Track completion rates of participating offenders</td>
</tr>
<tr>
<td>• Survey participating offenders and staff regarding experience and report back to CCP executives</td>
</tr>
<tr>
<td><strong>Progress:</strong> Pilot project completed, 50% completion rate, staff/participants surveyed expressed positive experience and requested continuation of same</td>
</tr>
</tbody>
</table>

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
### FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Department</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue Recovery Department</td>
<td>$78,000</td>
<td>$53,910</td>
</tr>
<tr>
<td>Health and Human Services Department</td>
<td>$1,701,288</td>
<td>$1,114,004</td>
</tr>
<tr>
<td>Sheriff Department</td>
<td>$574,887</td>
<td>$440,920</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$2,051,227</td>
<td>$1,700,903</td>
</tr>
</tbody>
</table>

**Note:** Figures for FY 15-16 are a rough estimate.

Health and Human Services Department includes Mental Health, employment development and Alcohol/drug. Probation Department includes contract services funds to community-based organizations and lease costs for the Day Reporting Center.

### FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-Custody Services****</td>
<td>$595,961</td>
<td>$487,529</td>
</tr>
<tr>
<td>Jail Work Alternative Program***</td>
<td>$288,000</td>
<td>$288,000</td>
</tr>
<tr>
<td>Pre-Trial Program**</td>
<td>$756,495</td>
<td>$735,839</td>
</tr>
<tr>
<td>Community Corrections Resource Center*</td>
<td>$2,164,781</td>
<td>$1,814,183</td>
</tr>
</tbody>
</table>

**Note:** Staff & costs reside in multiple budget units under different organizations, or staff is split unevenly between programs based on need & availability. Figures for FY 15-16 are a rough estimate.

*includes Non-SRA Realignment Staff-Probation, Probation CCRC Operational Costs, DHHS Mental Heath Staff (non-Jail), DHHS ETD Staff, DHHS Medications, DHHS Training & DHHS Misc. Costs; **includes Correctional Facility (Jail) Realignment Staff, HCCF Realignment Operational Costs, SRP Staff-Probation & Electronic Monitoring Contract; ***includes SWAP Program Daily Rate/Sheriff Admin &Revenue Recovery Admin; ****includes Mental Health Staff in HCCF.
Figures are not a set amount per program, but are allocated on a case-by-case basis as indicated by offender needs. Expenditures to date in FY 15-16.

¥ includes HRC, James Payne, James Spears, North Coast Transitions and Personal Growth Center; ‡ includes ADCS, HRC and Detox; + includes HFSC and MEND/WEND; § includes ADCS, SNSAC, HRC, ADCS Bonnie Brown and Personal Growth Center, *Residential Alcohol and Drug (AOD), detox, clean/sober housing; **Residential AOD, clean/sober housing; ***Residential AOD; ****Electronic Monitoring Equipment; *****Equine Assisted Growth/learning
Responses to Optional Survey Questions

**Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?**

Yes, we track a wide variety of data on offenders served in AB 109-funded programs. Currently we are working on integrating criminal justice and health and human services data on these same individuals in our data project with Humboldt State University. Until that project is complete, we are limited to looking at criminal justice outcomes and data: jail population; jail alternative program participation and completion rates; pre-trial program participation and outcomes; and Post-Release Community Supervision/Mandatory Supervision (PRCS/MS) offender supervision outcomes. This data can be looked at by assessed risk level as well as by assessed offender needs and further broken out by other demographic data held by Probation. Data is reviewed monthly by the CCP and CCP Executives. Trends are noted, needs and challenges identified, and solutions proposed for investigation or implementation. Public agency programs and services are the ones most easily evaluated, though evaluating behavioral health programs and services has been limited to numbers/types of services provided or accessed. Community-based services/organizations (CBOs) are not evaluated by the CCP, but outcomes are tracked on individual cases that have been referred.

**Does the county consider evaluation results when funding programs and/or services?**

Yes, we have piloted various programs/services and tracked offender outcomes, interviewed offenders, providers and stakeholders and discussed recommendations for future utilization of those program/services at the CCP Executive meetings.

**Does the county use BSCC definitions when collecting data? If so, which?**

The county uses the BSCC definitions for average daily population, conviction, length of stay and treatment program completion rates.

**Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?**

41-60%. This is difficult to determine on a funding level. The CCP has prioritized support of evidence-based programs (EBP) and services throughout our budget. Probation utilizes validated assessment instruments (Static Risk and Offenders Needs Guide, ORAS-PAT), and facilitates individual/group EBP Cognitive Behavioral interventions (Thinking for a Change, Moral Reconciliation Therapy™ (MRT™), Effective Practices in Community Supervision). Health and Human Services Department utilizes clinical assessment instruments (SAMHSA, Addiction Severity Index), facilitates group EBP Cognitive Behavioral interventions (MRT™, Matrix, Seeking Safety, Integrated Dual Disorders Treatment). CBO staffs have been sent to training in facilitation of University of Cincinnati’s Cognitive Behavioral Interventions for Offenders, MRT™ and Seeking Safety.

**We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?**

A full forensic mental health team is working within the jail and Community Corrections Resource Center to serve AB 109 and non-AB 109 clients (providing EBP services described above plus general behavioral health assessment, treatment, medication support, case management, "cross-walk" services from jail to resource center, etc.). The forensic mental health team works with Probation and Sheriff's Department Corrections staff in a multi-disciplinary team structure,
and consists of:

- 0.2 FTE Physician/Psychiatrist
- 1 FTE Psychiatric Nurse Practitioner
- 0.03 FTE MD Supervision for Nurse Practitioner
- 1 FTE Supervising Mental Health Clinician
- 1 FTE Psychiatric Nurse
- 3.1 FTE Mental Health Clinicians
- 1 FTE Senior Substance Abuse Counselor
- 2 FTE Substance Abuse Counselors
- 2 FTE Mental Health Case Managers

County Behavioral Health operates the local psychiatric inpatient facility, a psychiatric emergency services unit (walk-in, intake and assessment), a day-habilitative program for women with children under age 6, outpatient alcohol and drug counseling (standard and co-occurring groups).

The county has contracts with CBOs for residential detox, and 30-to 90-day residential treatment. There is generally capacity within these programs since Proposition 47 was passed in 2014. Concerns have been voiced about ongoing viability of individual programs because of decreases in clientele and increasing staffing costs, particularly when training in EBP is prioritized.

Private community clinics offer Suboxone programs and limited mental health services. Additionally, there are a number of private substance abuse and mental health counselors/clinicians providing services throughout the county.

**What challenges does your county face in meeting these programming and service needs?**

Getting the AB 109 offenders with long histories of criminal justice community supervision failure, specifically, to engage in the various behavioral health treatment offerings.

**What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?**

Better linkage between County Behavioral Health and community-based residential alcohol/drug programs to serve dual-diagnosed clients and stabilize them in treatment. Supporting training of CBOs in EBPs.

**Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.**

The county declined to respond to this question.
# Imperial County

## Goals, Objectives, Outcome Measures and Progress

### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal:</strong> Implement a residential treatment facility</td>
<td>Offer enhanced treatment to drug users through a non faith-based treatment program</td>
<td>The County has contracted with McAlister Institute, a non faith-based treatment facility, which services over 300 clients and offers 22 programs. The county has referred 58 individuals to the McAlister Institute for FY 2014-15.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
</table>
| **Goal:** Begin evidence-based programming at the Day Reporting Center | Begin Inside/Out program by partnering with Imperial Valley College; 15 incarcerated adults and 15 “outside” college students will meet weekly to complete a 1 unit college course | | The first Inside/Out Program class (1 unit) will be completed in December 2014  
- The second Inside/Out Program class (3 units) will begin in spring 2015  
- Provide monthly vocational trainings to work crew and start case management and discharge planning |

Additional services at the Day Reporting Center have been expanded within the fiscal year. Probation and New Creations entered into a contract to implement a Batterer’s Program which currently services 15 participants. Due to an increasing demand, offering a second Batterer’s Program is being considered. The Day Reporting Center has also increased its participants from 50 to 70 individuals who will begin evidence-based programming. Child Support representatives are available and assist offenders with child support matters two days per week. The Sheriff’s Office Community Service Inmate Work Crew has also continued to perform community service projects. They have covered 938 miles of roadside clean up, collected 4,215 (10 gallon) trash bags of litter, and have worked 1,219 hours of public service. Lastly, the Sheriff’s Office will work with Connectrex to develop a Pre-Trial Case Management System to streamline an offender’s process through the judicial process.
**Goal:** Implement Affordable Care Act to those who are not enrolled

**Objective:**
- Begin the enrollment process for all inmates along with probationers

**Measure:**
- Number of individuals enrolling in the Affordable Care Act

**Progress:** Catholic Charities is maintaining presence at the Day Reporting Center and has enrolled approximately 406 incarcerated individuals and participants/probationers at the Day Reporting Center.

---

**Goals, Objectives, Outcome Measures and Progress FY 2015-16**

**Goal:** Continue the Inside/Out College Program

**Objective:**
- Provide college courses to 15 incarcerated individuals and 15 community college students in the field of life skills and substance abuse

**Measure:**
- College courses offered in life skills and substance abuse

**Progress:**
- Spring 2015 course was completed
- Fall 2015 course was completed

---

**Goal:** Implement Self Management and Recovery Training (SMART) Recovery Substance Abuse Counseling

**Progress:**
- Implemented SMART Recovery therapy as a component to substance abuse counseling.

---

**Goal:** Implement a sex offender containment model

**Objective:**
- Implementation will provide services to sex offenders

**Progress:**
- Contracted with Matt Burgen, Certified Sex Offender Counselor
- Implemented polygraphing of sex offenders
- Use of GPS as a graduated sanction and alternative to incarceration
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- Probation: $1,893,890 (FY 2015-16), $1,844,742 (FY 2014-15)
- Behavioral Health: $1,608,231 (FY 2015-16), $609,772 (FY 2014-15)
- District Attorney: $1,608,231 (FY 2015-16), $217,648 (FY 2014-15)
- Day Reporting Center Operations: $279,000 (FY 2015-16), $240,000 (FY 2014-15)
- Other: $278,568 (FY 2015-16), $321,350 (FY 2014-15)

FY 2014-15 and 2015-16 allocations including growth
The county declined to respond to the optional questions.
## Inyo County

**Goals, Objectives, Outcome Measures and Progress**

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Improve in-custody re-entry services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>Create a new re-entry services coordinator position</td>
</tr>
<tr>
<td></td>
<td>Hire a re-entry services coordinator</td>
</tr>
<tr>
<td></td>
<td>Development a re-entry services program</td>
</tr>
<tr>
<td>Measure:</td>
<td>Personnel records</td>
</tr>
<tr>
<td></td>
<td>Program Plan</td>
</tr>
<tr>
<td>Progress:</td>
<td>A new re-entry services coordinator position was created and successful filled</td>
</tr>
<tr>
<td></td>
<td>The jail has a new re-entry services program for in-custody inmates</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Sustain alternative sentencing programs, treatment programs and offender supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>Keep jail population under 99 inmates</td>
</tr>
<tr>
<td></td>
<td>Continue treatment programs within the jail</td>
</tr>
<tr>
<td></td>
<td>Field supervision of realigned population</td>
</tr>
<tr>
<td>Measure:</td>
<td>Population of the jail</td>
</tr>
<tr>
<td></td>
<td>Graduation/completion of programs</td>
</tr>
<tr>
<td></td>
<td>Field contacts</td>
</tr>
<tr>
<td>Progress:</td>
<td>The jail population has not reached 99 inmates in the last year</td>
</tr>
<tr>
<td></td>
<td>Several inmates have graduated from ongoing treatment programs throughout the year and we have had inmates successfully test for GED,</td>
</tr>
<tr>
<td></td>
<td>A dedicated Deputy Probation Officer is assigned to the realigned population for field contacts and supervision</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Reduce recidivism rates in Inyo County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>Less than California Department of Corrections parole average rate of 70%</td>
</tr>
<tr>
<td>Measure:</td>
<td>BSCC definition of recidivism</td>
</tr>
<tr>
<td>Progress:</td>
<td>Last year our recidivism rate for the realigned population was under 70%</td>
</tr>
</tbody>
</table>

---

The CCP meets monthly
**Goals, Objectives, Outcome Measures and Progress FY 2015-16**

**Goal:** Implement a case management system in Probation and District Attorney (DA)

**Objective:**
- Implement a robust case management system to assist with data collection, outcome measures and case management

**Goal:** Sustain alternative sentencing programs, treatment programs and offender supervision

**Objective:**
- Keep the jail population under 99 inmates
- Expand treatment programs within the jail
- Work with re-entry coordinator for the supervision and case management of realigned population

**Measure:**
- Population of jail
- Re-entry service plan

**Goal:** Expand the inmate work program

**Objective:**
- Expand the inmate work program to include the realigned population

**Measure:**
- Number of realigned inmates that participate in the inmate work program

---

**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Department</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catastrophic Illness Fund</td>
<td>$300,000</td>
<td></td>
</tr>
<tr>
<td>District Attorney's Office</td>
<td>$90,000</td>
<td>$2,029</td>
</tr>
<tr>
<td>Health and Human Services</td>
<td>$39,828</td>
<td>$11,311</td>
</tr>
<tr>
<td>Sheriff's Office</td>
<td>$104,200</td>
<td>$98,520</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$137,078</td>
<td>$26,996</td>
</tr>
</tbody>
</table>

Inyo County does not allocate a specific amount of funds to any one department or agency. Instead, each department develops a budget that is approved by the Board of Supervisors. Funds are distributed to each department as expenditures are made. These expenditures are approved by the CCP Executive Committee Chair prior to disbursement.
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

*The county did not provide this information for FY 2015-16*

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

*The county did not provide this information*
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, we share a data analyst with Health and Human Services for different services and programs such as, treatment programs in the jail, jail population numbers, probation population numbers and risk/needs assessment data.

Does the county consider evaluation results when funding programs and/or services?

Our programs are relatively new, however if we evaluate a program that is not having success, we will no longer use it.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism and average daily population.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. All of our programs within the jail are evidence-based programs with the exception of the jail inmate work program. Electronic monitoring is a major component to our pre-trial services. The probation department uses a validated risk/needs assessment tool for case management decisions. The re-entry coordinator uses a case management tool to develop case plans and re-entry goals for the in-custody realigned population.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Inyo County has very few community-based organizations that are involved in the criminal justice system. We have one private provider that offers any type of group therapy including a 52 week Domestic Violence Program Most of our treatment services are provided by the County including alcohol and drug services (AODS), Moral Recondition Therapy™ (MRT™), Aggression Replacement Training® (ART®), parenting, mental health services and public health.

What challenges does your county face in meeting these programming and service needs?

The lack of available services. The struggle of recruiting qualified applicants for county positions.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

We provide a re-entry coordinator in the jail to help the realigned population coordinate services, treatment programs and educational programs once they are returned to the community.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We implemented MRT™ in FY 2014-15. MRT™ is a Cognitive Behavioral program for substance abuse treatment and offender populations.
# Kern County

## Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Continue to increase program availability for the Kern County adult criminal justice population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>- Maintain funding for current programs addressing the needs of the Kern County adult criminal justice population</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>- Maintain funding for current community-based organization (CBO) programs</td>
</tr>
<tr>
<td>- Funding CBO programs</td>
<td></td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>County staff began the process of developing a competitive request for proposals (RFP) process to award $5,102,115 in AB 109 funding approved by the CCP to community-based organizations and $375,000 in BSCC funding</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Continue participation in the Pew-MacArthur Results First Benefit-Cost Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>- Compile a comprehensive list of available programs and examine program effectiveness</td>
</tr>
<tr>
<td>- Create a recidivism cohort to determine the Kern County adult recidivism rate</td>
<td></td>
</tr>
<tr>
<td>- Determine the long-term costs, benefits and the payback period for programs and services in Kern County</td>
<td></td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>- Completion of the Kern County adult criminal justice program inventory</td>
</tr>
<tr>
<td>- Calculation of the Kern County adult recidivism rate</td>
<td></td>
</tr>
<tr>
<td>- Creation of a report outlining the long-term costs, benefits and the payback period for programs and services in Kern County</td>
<td></td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>On December 16, 2015, a two-page brief will be presented to the CCP summarizing key findings, interim successes, Kern County’s six year recidivism rate, the projected cost-effectiveness of current adult criminal justice programs, recommendations and next steps</td>
</tr>
</tbody>
</table>
**Goal:** Create a Strategic Plan to improve outcomes of the Kern County adult criminal justice population

**Objective:**
- Create an Ad Hoc Committee and secure a consultant charged with the creation of an AB 109 Strategic Plan
- Create goals, objectives and outcome measures for the Kern County CCP
- Create a narrative explaining goals, objectives, outcome measures and a plan to achieve outcome measures

**Measure:**
- Creation of an Ad Hoc Committee and retention of a consultant
- Creation of goals, objectives and outcome measures
- Adoption of a Strategic Plan by the Kern County CCP

**Progress:** In December 2014, a consultant was contracted to facilitate the development of a CCP Strategic Plan. On June 17, 2015, the consultant presented a draft of the plan with subsequent approval of a final plan on July 15, 2015

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**Goals, Objectives, Outcome Measures and Progress FY 2015-16**

**Goal:** Provide funding opportunities for CBOs to provide services to the criminal justice population in Kern County

**Objective:**
- Provide an open, fair and competitive process for offender re-entry services
- Develop a system for tracking CBO participant demographics, services, outcomes, cost per participant and program quality

**Measure:**
- Approve selected CBOs to provide services
- Acquire a system for tracking CBO participant outcomes

**Progress:** On behalf of the CCP, the Probation Department opened an RFP to provide community-based services for AB 109 individuals in Kern County on October 15, 2015, totaling $5,102,115. On December 16, 2015, the Project Facilitator will present the RFP Evaluation Committee’s recommendations. Additionally, the RFP Steering Committee will be requesting $30,000 to purchase a case management system, which will be provided to CBO’s to track participant demographics, services, outcomes and other data points as necessary
**Goal:** Incorporate evidence and research into program development and policymaking

**Objective:**
- Develop framework for using the Kern County Results First model and national research when developing and/or expanding programs
- Monitor investments and program outcomes
- Evaluate currently funded programs and practices

**Measure:**
- Incorporate strategies to utilize the Kern County Results First model and national research when developing and/or expanding programs into the Kern County CCP Implementation Plan
- Incorporate strategies to conduct program evaluations, monitor programs and monitor program outcomes into the Kern County CCP Implementation Plan
- Periodically present findings and/or reports on the implementation of strategies outlined above

**Progress:** Incorporating language into CBO contracts requiring participation in program evaluations

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**Goal:** Begin implementing Kern County's Strategic Plan by improving/increasing the successful integration of the offender into the community

**Objective:**
- Identify the current number of offenders who lack safe/stable housing
- Evaluate current risk/needs assessments to prioritize services needed to address the top criminogenic needs
- Develop comprehensive case plan for discharge planning to share with coordinating agencies

**Measure:**
- Baseline data will be defined/collected in order to measure successful outcomes
- Coordinating agencies, service providers and/or re-entry programs will have shared assessment information
- Increase stable housing for offenders by 10% each year of the Strategic Plan

**Progress:** Several of the CCP agencies are in the process of adding additional staff to allow Kern County to reach the goals outlined in the Strategic Plan. The addition of this staff will make it possible to focus on the tasks of evaluating current programs, collect more accurate data and information, better monitor current CBO’s as well as seek out future funding opportunities for the County
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- Street Interdiction Team (Local Police Depts)
- Public Defender
- Probation Department
- Employers' Training Resource
- Mental Health/Substance Abuse
- Other (Human Resources)
- Sheriff's Office

FY 2014-15 - $31,527,985
FY 2015-16 - $36,581,464

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Employers' Training Resource & Paid-Work Experience Program
- Mental Health and Substance Abuse Services
- In-Custody Services
- Virtual Jail Program (Including Sheriff's Parole & Work Release)
- Electronic Monitoring Program/GPS
- Pre-Trial Release Program
- Evidence-Based Program Unit
- Intensive Community Supervision
- Day Reporting Center

FY 2014-15 - $20,953,654
FY 2015-16 - $24,605,611
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, Kern County conducted a Day Reporting Center (DRC) Evaluation Study to examine the recidivism rates of the DRC participants. Three groups were analyzed: those who graduated from the DRC program; those who participated in the program for at least 90 days but did not graduate; and a control group who did not participate in the DRC but had similar characteristics as those who did. It was concluded that the DRC program significantly reduces recidivism for high-risk offenders and saves the taxpayers a significant amount of money through a reduction in incarceration, prosecution, defense, courts, supervision and victimization costs.

Results First Project: In 2014 Kern County participated in the Pew-MacArthur Results First Initiative (Results First). Representatives from several County agencies have developed a comprehensive program inventory, calculated a cumulative Kern County recidivism rate, determined county specific criminal justice costs and populated the Kern County Results First Model. This information will be provided to policymakers to assist with programmatic decisions.

Community-Based Organization (CBO) Monitoring: The County contracts with several CBOs to provide re-entry services such as residential/transitional housing, transportation, substance abuse services, vocational and educational services and case management services. Monitoring Includes: On-site visits, monthly meetings and CBO annual reviews. Currently researching program management and outcome software for tracking participant demographics, services, outcomes, cost per participant and program quality.

Public Policy Institute of California (PPIC) Data Pilot Project: This pilot project will allow our County to collect data elements that will allow for the identification of best practices among our county’s corrections agencies and measure offender behavior and system performance under Public Safety Realignment.

Does the county consider evaluation results when funding programs and/or services?

Yes, the DRC evaluation/study was used to expand the DRC and to create a Drug DRC that specifically focuses on substance abuse. This study was used to justify and fund a doubling of capacity from 200 to 400 per year and extend contract for two additional years. Results First Benefit-Cost Analysis will be used to help determine which currently funded programs are cost beneficial allowing the CCP to spend tax payer dollars more wisely and make the community a safer place to live. The model will be used to assess current and proposed programs.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction and treatment program completion rates.
Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%. These programs include: Sheriff Evidence-Based Programming Unit, Probation Evidence-Based Programming Unit, Day Reporting Center, Intensive Community Supervision, Pre-Trial Release Program, Electronic Monitoring Program, Virtual Jail In-Custody programming, Mental Health/Substance Use Disorder - Matrix, Seeking Safety, Moral Reconation Therapy™ (MRT™), Motivational Interviewing and Stages of Change Work Experience & Training Programs.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The AB 109 programs funded within Kern County Mental Health encompass both in-custody services and outpatient post-release mental health and substance use disorder (SUD) services. These services are designed to meet the needs of the population, including chronic and persistent mental illness and/or co-occurring substance use disorders, anger management, peer support systems, transitional housing needs, psychological trauma, errors in reasoning or criminal thinking. Services also include linkages to physical health-care providers, community support systems and education/employment resources.

In-Custody Services include:
- Stages of Change and Motivational Interviewing
- Seeking Safety
- MRT™
- Matrix

Outpatient Services include:
- Adult Transition Team (ATT)
- Aggression Replacement Training (ART®)
- In-Custody Services listed above are continued in outpatient settings, maintaining a continuum of care

Crisis Services include:
- Mobile Evaluation Team (MET)
- Psychiatric Evaluation Center/Crisis Stabilization Unit (PEC/CSU)

Substance Use Disorder (SUD) Outpatient Services:
- SUD services are organized into five levels of care. Each level is defined by eligibility criteria, treatment goal and expected service package for each individual enrolled

What challenges does your county face in meeting these programming and service needs?

1. Providing services in a large county with rural, remote and isolated areas.
2. Limited funding to increase capacity for providing programming and services.
3. Limited qualified CBOs that can meet the needs of our offender.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Improved communication, collaboration and rapport with partner agencies, CBOs and groups
- Sharing of information, assessments, data and resources
- Developing a county-wide criminal justice cost/benefit analysis

The following are news articles regarding specific criminal justice programs and their effectiveness in Kern County:


Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Day Reporting Center: The DRC is a "one-stop shop" for moderate to high-risk offenders. Services include: Cognitive Behavioral Therapy, counseling, drug testing, drug education, educational service, employment services and much more. In Kern County we have observed a correlation between graduation from the DRC and a 23% drop in recidivism when compared to a control group. Please see the Kern County DRC Study for more information. http://www.kernprobation.com/ab109ccp-realignment/plans-and-reports/

Matrix: The Matrix Model is the modality of treatment for individuals with substance use disorders that provides interventions utilizing Cognitive Behavioral Therapy and uses a framework of motivational interviewing for engaging individuals in treatment and helping them achieve abstinence. Participants learn about issues critical to addiction and relapse, receive direction and support from a certified counselor, become familiar with self-help programs, and are monitored for drug use by testing. In Kern County, substance use disorder treatment is provided to individuals requiring outpatient, intensive and residential services. In FY 2014-15, substance use disorder treatment using the Matrix Model in Kern County served 2185 individuals. Out of the 2,185 individuals, 1,547 individuals did not attend their substance abuse appointment. Out of the 1,547 individuals that didn't show, 1,193 were unduplicated individuals, as it not uncommon that individuals will reschedule their appointments after not attending first treatment appointment.
In-Custody Programs: The Sheriff's Office provides a variety of In-Custody Programs including GED preparation, Life Skills, parenting, anger management, domestic violence, substance abuse, health, art, auto-body, cafeteria and food Services, computer classes, and a Veterans' program. Though many of these programs are grant funded, AB 109 funding provides staff, supervision, supplies and administrative costs for these programs. In FY 2014-15 these programs served a combined total of 3,905 participants (NOTE: this is a duplicative count; many participants enroll in multiple programs).

Community-Based Sober Living Environments: Kern County contracts with six community-based sober living environments. In addition to drug and alcohol free living environments, these organizations also provide drug testing, require counseling, and aid participants in educational and employment attainment. In FY 2014-15 these organizations saved 51,808 jail bed days, had 466 successful completions and maintained an 86% retention rate.
Kings County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Continue to implement a system of alternatives to incarceration for pre- and post-convictions</th>
</tr>
</thead>
</table>
| Objective: | • Increase alternatives to incarceration programs for both pre- and post-convictions  
| | • Research and develop additional pre-trial options for offenders |
| Measure: | • Recidivism rates for non-sex offenders, non-violent offenders and non-serious offenders  
| | • Continue to track the data to measure the success of the alternative programs |
| Progress: | Expansion of rehabilitation beds and the Day Reporting Center is allowing Kings County to explore viable options to incarceration |

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Collaborate with local agencies to provide local resources to Post-Release Community Supervised offenders</th>
</tr>
</thead>
</table>
| Objective: | • Identify and establish increased collaboration with local agencies  
| | • Increase the local resources for Post-Release Community Supervised offenders |
| Measure: | • Number of offenders sentenced to alternative and probation programs  
| | • Number of offenders sent to state prison and local custody |
| Progress: | • 549 offenders are on electronic monitoring  
| | • 89 offenders are in residential treatment program and all attended the Day Reporting Center |

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies


FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services
• In FY 2014-15, $203,300 was allocated to the Probation Department for electronic monitoring.
• In FY 2015-16, $186,150 was allocated to the Probation Department for electronic monitoring.

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services
• The county reported no allocations to non-public agencies for programs and services.

The county declined to respond to the optional questions.
Community Corrections Partnership Membership
(November 2, 2015)

Rob Howe
Chief Probation Officer

Stephen Hedstrom
Presiding judge or designee

Matt Perry
County supervisor or chief administrative officer or Designee and Department of Employment

Don Anderson
District Attorney

Angela Carter
Public Defender

Brian Martin
Sheriff

Brad Rasmussen
Chief of Police

Carol Huchingson
Department of Social Services

Linda Morris
Department of Mental Health and Alcohol and Substance Abuse Programs

Brock Falkenberg
Office of Education

Dr. Robert Gardner
Community-based organization

Debbie Wallace
Victims’ interests

The CCP meets semi-annually

Lake County

Goals, Objectives, Outcome Measures and Progress
FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Increase the number of clients receiving, participating in and completing evidence-based programming services</th>
</tr>
</thead>
</table>
| Objective | • Improve effectiveness of programs offered by expanding access to clients  
• Add and expand offered programs |
| Measure | • Number of clients enrolled, attending and completing programs  
• Recidivism rates of clients completing program compared to clients not attending or completing programs |
| Progress | We have seen a 20% increase in program completion rates |

<table>
<thead>
<tr>
<th>Goal</th>
<th>Improve the continuum of services from in-custody, to supervised, to discharge</th>
</tr>
</thead>
</table>
| Objective | • Add in-custody services  
• Increase the use of full residential programs as part of the continuum |
| Measure | • Success rates of clients receiving services throughout custody and supervision against those who do not |

<table>
<thead>
<tr>
<th>Goal</th>
<th>Improve supervision through the use of electronic monitoring</th>
</tr>
</thead>
</table>
| Objective | • Increase the use of electronic monitoring in the Alternative Work Program  
• Increase supervision effectiveness with fewer staff |

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
An additional $110,654 in carry-over funds were used in the FY 2014-15 budget
An additional $512,944 in carry-over funds were used in the FY 2015-16 budget

*Day Reporting Center
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buddy's House Sober Living</td>
<td>$6,300</td>
<td>$6,300</td>
</tr>
<tr>
<td>Environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hilltop Recovery Full Residential</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Treatment</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

FY 2015-16  - $56,300  
FY 2014-15  - $56,300
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

All programs and services are evaluated annually by the CCP Executive Committee. These evaluations are used to justify and approve funding requests. How they are evaluated varies depending on program. Most of our programs are evaluated by participation, completion and ultimately recidivism rates of those that completed the program.

Does the county consider evaluation results when funding programs and/or services?

Yes, results of programs funded are considered annually by the CCP Executive Committee when deciding and approving funding requests.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definition for average daily population.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%. A large portion of our funds are dedicated to the operation of Day Reporting Centers (DRCs), in-custody treatment, mental health and alcohol and other drug dependency treatment.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Behavioral Health receives funding for a Mental Health Specialist, Substance Abuse Counselor and a portion of Staff Psychiatrist position. These positions are dedicated exclusively to realignment clients, either in-custody or at our DRC. Funding ($56,000) is also provided for full residential substance abuse sober living environment treatment and for full service DRC and a remote check in DRC ($786,100).

What challenges does your county face in meeting these programming and service needs?

Our primary challenge has simply been getting clients to participate and take advantage of the programs we offer.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In the past we contracted out for our DRC. Beginning in FY 2015 we opened our own Probation-managed DRC. This has allowed us to increase our staff, lower supervision ratios, increase our own training and better track our progress.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We believe our newly opened, Probation managed DRC is the most promising program we have. We hope to have data to support that opinion soon.
### Lassen County

<table>
<thead>
<tr>
<th>Goals, Objectives, Outcome Measures and Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FY 2014-15</strong></td>
</tr>
<tr>
<td><strong>Goal:</strong> Expand use of alternatives to incarceration</td>
</tr>
<tr>
<td><strong>Objective:</strong> Use assessment tools in determining eligibility and to maintain public safety</td>
</tr>
<tr>
<td>• Use electronic monitoring for low-risk offenders: reduce job loss, number of offenders entering/leaving the facility each day (work/school furlough and trustees)</td>
</tr>
<tr>
<td>• Use inpatient treatment programs for low-risk offenders to reduce recidivism</td>
</tr>
<tr>
<td><strong>Measure:</strong> Number of electronic monitoring days rather than jail bed days</td>
</tr>
<tr>
<td>• Number of inpatient treatment bed days rather than jail bed days</td>
</tr>
<tr>
<td>• Number of violations of the terms of participation in alternative programs</td>
</tr>
<tr>
<td><strong>Progress:</strong> Electronic monitoring was served in place of 2,800 jail bed days</td>
</tr>
</tbody>
</table>

**Goal:** Establish/maintain a Day Reporting Center (DRC) for use by offenders under the supervision of probation and sheriff's alternative to incarceration program

**Objective:**
- Locate a site for a permanent facility
- Recruit and hire a full time DRC coordinator
- Increase the number of offenders from Probation and Sheriff's Office who are referred to DRC for programs and case management

**Measure:**
- Number of program hours completed
- Number of offenders referred to the DRC
- Number of participants completing the DRC

**Progress**
A permanent site has been selected, a full-time program coordinator was hired

---

The CCP meets monthly
Goal: Establish a data committee, develop a local plan for data collection with data definitions

Objective:
- Establish a data work committee
- Establish data points and methods for collection
- Establish a process for compiling data

Measure:
- Local data points and measures identified
- Local data collection methods identified

Progress: Data committee planning is currently underway and data points are being identified

Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Restructure and maintain a DRC for use by offenders referred by Probation and the Sheriff's Office

Objective:
- To provide efficient and adequate services for offenders at DRC
  - To increase the number of offenders participating in services at the DRC
  - Increase the number of offenders from Probation and Sheriff’s Office who are referred to the DRC

Measure:
- Number of offenders referred to the DRC
- Number of new convictions the DRC participants receive
- Number of new services the DRC participant is receiving since participating in the DRC

Progress: Currently working on restructuring and establishing the DRC in the new location

Goal: Expand use of alternatives to incarceration

Objective:
- Use assessment tools in determining eligibility and to maintain public safety
  - Use electronic monitoring for low-risk offenders to reduce job loss and offenders entering and leaving the facility each day (work/school furlough and trustees)
  - Use inpatient treatment programs for low-risk offenders to reduce recidivism and increase vocational training opportunities for offenders serving an alternative sentence

Measure:
- Number of electronic monitoring days rather than jail bed days
- Number of inpatient treatment bed days rather than jail bed days
- Number of violations of the terms of participation in alternative programs
Goal: Establish a data committee, develop a local plan for data collection with data definitions

Objective:
- Establish data work group
- Establish data points and methods for collection
- Establish process for compiling data

Measure:
- Local data points and measures identified
- Local data collection methods identified
- Local data collection plan completed

Progress: Currently working to establish a data work group and identify data points not currently being collected

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Program Expenditures</td>
<td>$130,517</td>
<td>$130,517</td>
</tr>
<tr>
<td>Probation</td>
<td>$219,332</td>
<td>$154,302</td>
</tr>
<tr>
<td>Health &amp; Social Services DRC Coordinator</td>
<td>$20,202</td>
<td></td>
</tr>
<tr>
<td>Sheriff's Department</td>
<td></td>
<td>$846,541</td>
</tr>
<tr>
<td>Compliance Team/Police Department</td>
<td>$18,340</td>
<td>$18,340</td>
</tr>
<tr>
<td>Behavioral Health Agency</td>
<td>$75,000</td>
<td>$75,000</td>
</tr>
<tr>
<td>Public Defender</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>District Attorney</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

FY 2015-16 - $1,299,730
FY 2014-15 - $1,121,167
**These Correctional Deputies Conduct assessments specific to offender risk and needs. They process and research all applications for alternatives to incarceration. They make recommendations related to eligibility for alternatives and work assignments, coordinate re-entry, and coordinate treatment programs for offenders who are in-custody and on alternatives to incarceration. They also manage offenders on alternatives to incarceration programs, including electronic monitoring, Sheriff’s Work Assistance Program (SWAP) and participation in residential treatment programs.**

**This clerk position conducts assessments of new bookings for classification and initial evaluation of custody status and potential alternatives to incarceration. They accept and process applications for alternatives to incarceration and do other work to support alternative custody programs.**

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

- The county reported no allocations to non-public agencies for programs and services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No, we are currently tracking the effectiveness of our programs through recidivism reduction. We are in the process of acquiring a new case management program that will allow us to better evaluate effectiveness of programs.

Does the county consider evaluation results when funding programs and/or services?

We plan to, but have not implemented extensive programs yet.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

20% or less.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The majority of services offered in our area are public county-based voluntary outpatient community services.

What challenges does your county face in meeting these programming and service needs?

One of the largest obstacles for our community is under-staffing and the lack of qualified applicants to fill the positions.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Utilizing evidence-based programs and curriculum that provide measurable outcomes.
- Our electronic monitoring (EM) program has proven successful, but we have made some modifications through lessons learned. We have used multiple community supervision assessment tools and found that the Ohio Risk Assessment System-Community Supervision Tool best fits our needs. We also tested multiple EM service vendors and ultimately went with a company that has a 24-hour a day call center for monitoring and offered two options for alcohol monitoring. The alcohol monitoring has allowed us to place people on alternatives to incarceration programs that would not have been eligible otherwise. It has allowed the offenders to remain employed and prevented them from relapsing.
- Our motor pool vocational program provides offenders an opportunity to work on county vehicles under supervision. We initially used offenders who were in-custody, but had a number of issues with contraband. We reevaluated the program and decided to staff the program with offenders who were placed in alternatives to incarceration programs. Offenders report to the jail each day where they work in the motor pool and attend classes in the Day Reporting Center.
Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

- Change Company curriculum has had positive results within our facilities and the Day Reporting Center.
- EM resulted in around 2,800 jail bed days saved in the 2014-2015 fiscal year. Offenders on EM report to a variety of work/vocational training assignments, as well as the Day Reporting Center.
- We recently had a local male offender in his 20s who had a long term to serve and many felony convictions. He scored moderate on our assessment tool which caused some concern, but we wanted to give him an opportunity, so we placed him on EM. He reported to the jail each weekday and worked on county vehicles under supervision. He learned basic vehicle maintenance and repair skills in the motor-pool, and learned life skills through programming in the Day Reporting Center. Prior to his release from EM, we were able to help him find a job with a contractor who provides services to the Department of Defense. He successfully completed his term on EM and is still employed.
Membership (November 2, 2015)

Jerry Powers
Chief Probation Officer

James Brandlin
Presiding judge or designee

Sachi Hamai
County supervisor or chief administrative officer or designee

Jackie Lacey
District Attorney and Victims’ interests

Ron Brown
Public Defender

Jim McDonnell
Sheriff

Charlie Beck
Chief of Police

Sheryl Spiller
Department of Social Services

Marvin Southard
Department of Mental Health

Cynthia Banks
Department of Employment

Cynthia Harding
Alcohol and Substance Abuse Programs

Vacant
Office of Education

Troy Vaughn
Community-based organization

The CCJCC meets monthly

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Los Angeles County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

Goal: Incorporate Substance Use Disorder (SUD) education and treatment into the Sheriff Department’s Education-Based Incarceration (EBI) programming for N3 (Public Safety Realignment) inmates

Objective:
- Identify contract provider and additional staff for this program
- Plan drug education program for N3 female inmates
- Plan direct SUD treatment services delivery for N3 female inmates

Measure:
- Selection of contract provider and hiring of staff for this program
- Timetable for implementation of drug education services and direct SUD treatment services for AB 109 female inmates

Progress: A contract provider has been selected and staffing will soon be in place. Currently, no inmates have yet been placed, but the Department of Public Health (DPH), Sheriff’s Department and Department of Health Services (DHS) continue to plan for the implementation of this program, which is expected to begin in FY 2015-16.

Goal: Increase apprehension and arrests of Post-Release Community Supervision (PRCS) absconders

Objective:
- Coordinate with other County Departments and law enforcement agencies to identify and apprehend absconders with active arrest warrants

Measure:
- Increase the number of absconders who are arrested in comparison to that of the previous year

Progress: There were 396 Post-Release Sentenced Person (PSP) Parolee-At-Large (PAL) arrests in fiscal year 2014-2015, which is a 53% increase over the 258 PSP PAL arrests in fiscal year 2013-2014. The apprehension of each absconder is tracked in PALTRAC. Many absconders have been located and arrested in neighboring counties.
**Goal:** Develop a centralized system to facilitate Public Safety Realignment data analysis and reporting between departments

**Objective:**
- Build an interface between Justice Automated Information Management Statistics (JAIMS) system and Treatment Courts Probation Exchange (TCPX) system
- Create data exchange processes to enable demographic statistical reports for AB 109 inmates

**Measure:**
- Completion of interface between Statistics JAIMS system and TCPX system
- Complete and deploy to production demographic statistical reports for Public Safety Realignment individuals

**Progress:** Demographic statistical reports for AB 109 individuals have been completed and deployed to production. A Memorandum of Understanding for the data exchange has been submitted, the interface architecture is set with required data elements from TCPX documented and replication software for JAIMS/TCPX replication has been purchased and is ready for deployment. The requirements gathering for the JAIMS/TCPX interface is complete and the team is set to begin development. A staff person was hired on January 26, 2015 to assist with this project.

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*

### FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Diversion</td>
<td>$7,600,000</td>
<td>$7,600,000</td>
</tr>
<tr>
<td>Conflict Panel</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Alternate Public Defender’s Office</td>
<td>$1,456,000</td>
<td>$965,000</td>
</tr>
<tr>
<td>Public Defender’s Office</td>
<td>$2,887,000</td>
<td>$2,185,000</td>
</tr>
<tr>
<td>Chief Executive’s Office</td>
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<tr>
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<tr>
<td>Probation Department</td>
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</table>

- **FY 2015-16 - $347,157,000**
- **FY 2014-15 - $317,576,000**
FY 2014-15: **Probation** (Community Supervision of PSPs and N3s $63,805,000—Direct Supervision $52,684,000, HUB/Custody Liaison $5,826,000, Pre-Release Center $3,955,000, Local Law Enforcement Partnership $1,340,000; CBO Services and Fixed Assets $10,924,000); **Sheriff** (Custody Operations $152,714,000, In-Custody Programs $7,003,000, Valdivia $1,554,000, Parole Compliance Unit $10,814,000, Fire Camps $1,208,000); **Fire** (Fire Camp Training $537,000, Fire Camp Operations $4,508,000); **Public Health** (Community-Based Services $8,126,697—Community-Based Services $6,396,376, Community Assessment Services Center (CASC) $1,730,321; Substance Treatment and Re-Entry Track (START) $2,679,325, Administrative Oversight $2,097,978,—Contract and Program Monitoring $1,447,978, Data Management $650,000); **Mental Health** (Community-Based Services $34,977,135—Direct Services $8,347,237, State Hospital $975,000, General Outpatient Contract Services $24,256,998, Medications $1,397,900, In-Custody Services $4,963,205—Mental Health Court Program (MHCP) $4,963,205; Other Revenue $(11,199,340)); **Health Services** (Inmate Medical Services at LAC+USC $15,306,000, PRCS Medical Care Coordination $213,000); **Chief Executive’s Office** (Program Oversight $237,000); **Auditor Controller** (Claims Processing $237,000); **Countywide Criminal Justice Coordination Committee** (Public Safety Realignment Team (PSRT) $178,000); **Information Systems Advisory Body** (Justice Automatic Information Management Statistics (JAIMS) $594,000).

FY 2015-16: **Probation** (Community Supervision of PSPs and N3s $68,678,000—Direct Supervision $53,145,907, HUB/Custody Liaison $6,521,707, Pre-Release Center $4,430,050, Local Law Enforcement Partnership $4,580,336; CBO Services and Fixed Assets $12,900,000); **Sheriff** (Custody Operations $163,255,000, In-Custody Programs $7,601,000, Valdivia $1,494,000, Parole Compliance Unit $11,164,000, Fire Camps $800,000); **Fire** (Fire Camp Training $537,000, Fire Camp Operations $5,208,000); **Public Health** (Community-Based Services $8,753,504—Community Assessment Services Center (CASC) $2,068,294, Treatment Activity $6,685,210; Jail Health Substance Use Disorder $3,602,920, Administrative Oversight $2,423,576); **Mental Health (MH)** (Community-Based Services $33,941,413—Direct Services $7,746,506, State Hospital $525,000, IMD Contracts $1,290,000, Non-Medi-Cal Contracts $3,927,677, General Outpatient Contract Services $18,800,230, Medications $1,652,000, In-Custody Services $6,329,817—MH Court Program (MHCP) $831,666, Men’s Jail MH Services (JMHS) & JMET $3,955,438, Women’s Jail MH Services (JMHS) $1,542,713; Other Revenue $(11,394,230)); **Health Services** (Inmate Medical Services at LAC+USC $11,118,000, PRCS Medical Care Coordination $213,000, Integrated Jail Health Services $186,000, Community Health Worker Program $2,059,000); **Chief Executive’s Office** (Program Oversight $319,000); **Auditor Controller** (Claims Processing $246,000); **Countywide Criminal Justice Coordination Committee** (Public Safety Realignment Team (PSRT) $228,000); **Information Systems Advisory Body** (Justice Automatic Information Management Statistics (JAIMS) $1,019,000); **District Attorney** (Restitution Enhancement Program $439,000, Prosecution $4,043,000)

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

All funding is allocated to public agencies. However, several departments receiving funding subsequently contract with a non-public agency or agencies for services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Los Angeles County assesses the effectiveness of programs and/or services funded with its Public Safety Realignment allocation. Reports on Public Safety Realignment are submitted to the County Board of Supervisors on a quarterly basis. These reports provide updates on Public Safety Realignment objectives and whether they are being met. The reports also discuss programs and services that are being offered and how effective they are. Included with the Quarterly Reports on Public Safety Realignment are a Quarterly Performance Measures Report and a Monthly Data Report. The Performance Measures Report is updated by departments and tracks the progress that they are making throughout the fiscal year in meeting their stated goals. The Data Report provides information on relevant numbers concerning Public Safety Realignment and their trends over time. In addition, the County of Los Angeles is currently participating in a multi-county study by the Public Policy Institute of California (PPIC). This study is examining the implementation of Public Safety Realignment in participating counties and the effectiveness of various programs and services. Finally, the County is in the process of contracting with a researcher to conduct an AB 109 Evaluation. This evaluation will cover the entire extent of Public Safety Realignment in Los Angeles County, from the time of implementation in October 2011 up to the present. Among other tasks, this project will evaluate the effectiveness of programs and services that are funded with the Public Safety Realignment allocation.

Does the county consider evaluation results when funding programs and/or services?

Yes, the effectiveness and results of programs and/or services – in addition to programmatic needs identified by departments – are considered when funds are allocated.

Does the county use BSCC definitions when collecting data? If so, which?

Data is collected in a manner that can support measurements as defined in many different ways. While county definitions may not be identical to those established by BSCC, data collection efforts are intentionally flexible to support multiple definitions, including the BSCC’s.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. All programs and/or services funded by Public Safety Realignment funds are evidence based.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Through the Department of Public Health Substance Abuse Prevention and Control’s (DPH-SAPC’s) Master Agreement Work Orders, the following categories of substance use disorders (SUD) treatment services are available and funded with AB 109:

- Outpatient Counseling Services: are alcohol and/or drug treatment and recovery services that are provided in a drug-free, non-drinking environment, involving participation of no more than nine hours of structured programming per week directed towards alleviating and/or preventing alcohol and drug problems.
• Intensive Outpatient Treatment Services (Day Care Habilitative Service): involve a minimum of nine hours (three hours per day, three days per week) and maximum of 19 hours of structured programming per week based on a participant’s treatment plan including assessment, counseling, crisis-intervention and activity therapies or education.

• Narcotic Treatment Program Services: utilize methadone (or levoalphacetylmethadol [LAAM] if available and prescribed) as a narcotic replacement drug, when ordered by a physician, as medically necessary to alleviate the symptoms of withdrawal from opioids. Participants must receive a minimum of 50 minutes of face-to-face counseling sessions with a therapist or counselor for a maximum of 200 minutes per calendar month.

• Residential Treatment Services: is a 24-hour residential program where recovery services and/or specialized recovery services are made available to participants who have alcohol and/or drug problems. Program participants are to be involved in no less than six hours of planned treatment and recovery activities per day under the supervision of trained staff.

• Medication Assisted Treatment (MAT): is the use of medications in combination with counseling and behavioral therapies, to provide a whole-participants approach to the treatment of SUD. MAT is clinically driven with a focus on participants’ care.

• Residential Medical Detoxification Services: are directed towards the care and treatment of participants including, but not limited to, homeless participants suffering from the toxic effects of alcohol, narcotics and/or dangerous drugs. Once a participant is admitted for detoxification, medical staff should perform a comprehensive assessment to determine the level of prior and recent use and to determine the level of substance abuse and dependence. These services shall be conducted within a facility licensed and approved by the State of California, Department of Health Care Services in accordance with current Federal and State standards for such facilities.

The types and levels of mental health services and programs available for our AB 109 population include state hospital level of care, institution for mental disease (IMD) level of care, institution for mental disease IMD Step-down level of care and outpatient services. The outpatient services include Full Service Partnership-like (FSP-like), Field Capable Clinical Services-like (FCCS), Wellness-like, and traditional outpatient (Mental health services and Co-Occurring services).

In addition, the Sheriff's Department, through the Education-Based Incarceration (EBI) Bureau, contracts with approved adult educational schools to provide courses at all jail facilities. The curriculum is based on California state standards, and is kept up to date with current requirements. It includes:

• Adult Basic Education: This series of courses is offered to students preparing for the formal GED preparation course. It features a systematic "building block" approach to development of improved reading, writing and math skills.

• General Educational Development: For inmate students who have not yet achieved a high school diploma, this program offers an alternative diploma in the form of a state-approved equivalency series in the areas of language arts (reading, writing and comprehension skills), mathematics, science and social studies.

• The Sheriff's Department also offers a wide variety of industrial training courses designed to increase the likelihood of employment in specific vocations after release. Here are a few examples of the current and growing list of vocational training courses available: Cement and Concrete Block Masonry, Commercial Welding, Residential Construction, Computer Operations and Pet Grooming, among many others.

• EBI offers a wide variety of behavior modification courses taught using a modern interactive method known as “facilitation.” These courses include: IMPACT - a twelve-step curriculum that is partially based upon the tenets of the Narcotics Anonymous program; and Substance Abuse Education, which covers the physiology and psychology of substance abuse, including the effects of drugs and alcohol on the mind and body, and strategies for quitting.
• In partnership with the Department of Public Health (DPH), the Sheriff’s Department offers Alternative to Custody Treatment (ATC) programming through which offenders spend the final 90 -120 days of their sentences in community-based substance abuse treatment.

• Beginning in early 2016, in partnership with the Department of Mental Health (DMH), the Sheriff’s Department will offer ATC programming through which offenders spend the final 90-120 days of their sentences in community-based mental health and substance abuse treatment.

What challenges does your county face in meeting these programming and service needs?

Some of the challenges to meeting programming and service needs are as follows:

• Staffing and office space needs: The higher-than-anticipated risk level of Post-Release Community Supervision (PRCS) individuals presents a challenge for the Probation Department. While AB 109 caseloads have dropped, the level of risk and needs of this population places additional demands on supervision. In addition, limited office space presents a challenge for the delivery of evidence-based services.

• Jail bed funding: AB 109 funding is insufficient to maintain the jail beds for the current population of 3,500. This funding shortage limits the Sheriff Department’s ability to greatly expand its programming options.

• Sex Offender Treatment: Since the inception of Public Safety Realignment Act, DPH-SAPC and its county partners have continued to identify a gap in treatment services for the sex offender population currently under AB 109 supervision. Residency restrictions placed on registered sex offenders create barriers for this population to access needed treatment services.

• Housing and treatment infrastructure needs: The county continues to address the challenge of meeting long-term housing needs for supervised persons with mental health issues and chronic medical issues. Expanding employment opportunities and residential substance abuse services for supervised individuals also remains an ongoing challenge.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Public Safety Realignment implementation in Los Angeles County is continually evolving. Some of the programmatic changes that have been made since implementation began include the following:

• Co-Location of Deputy Probation Officers (DPOs): The individuals that were released to the County on PRCS were of higher risk than had been expected. DPOs are now co-located with local law enforcement agencies to conduct compliance checks on Post-Release Sentenced Persons (PSPs).

• Expanded treatment modalities: In addition to the individuals on PRCS being higher risk than expected, the treatment needs of individuals were higher than expected. The DPH-SAPC expanded available treatment modalities to address this issue.

• Training for treatment providers: Treatment providers were not all equally trained to work with forensic populations. To address this, the DMH designed a curriculum to enhance knowledge and practices related to engagement and treatment of persons with mental health and co-occurring disorders with criminal justice backgrounds. Beginning in January 2014 and continuing through the last fiscal year, the following courses have been offered to treatment providers and DMH staff: Assessment and Treatment of AB 109 population; Co-occurring Disorders Assessment with the Forensic Population; High Fidelity Cognitive Behavioral Treatment/evidence-based programs (EBP); Seeking Safety (Trauma focused and Substance Abuse Treatment/EBP); Complex World of Anti-Social Personality Disorders; Crisis Oriented Recovery Services/EBP Model; SSI and Benefits Training for the AB 109 Population; and Treatment and Management of Sex Offenders.
• START Program: The Sheriff's Department is partnering with DPH-SAPC to implement the Substance Treatment And Re-entry Transition (START) program. The program just launched at the end of June 2015 and has begun placing sentenced female inmates into community substance use disorder treatment beds as an alternative custody placement. Once fully operational, this program will provide a total of 65 community beds for female participants.

• COIN program: The Co-Occurring Integrated Care Network (COIN) was implemented in 2013 by DPH-SAPC, DMH, and the Probation Department to address the needs of PSPs with chronic SUD and severe and persistent mental illness. COIN provides residential mental health and co-occurring disorder treatment at the County's Antelope Valley Rehabilitation Center to PSPs referred by the AB 109 Revocation Court.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

• Skid Row Pilot Project: was developed in 2015. This program co-locates two DPOs and local law enforcement in the “skid row” area of downtown Los Angeles. Twice a month, the teams set up the mobile resource center to enable homeless persons residing in the area the opportunity to report for supervision and be connected with services such as housing, employment, substance abuse treatment and mental health treatment. The project has displayed positive results in that we have seen a reduction in the number of warrants issued in the area and we have moved several supervised persons off of “skid row” and into transitional housing.

• Community-Based ATC programs: The use of community-based ATC programs has been very effective in serving the population with SUD. 115 inmates successfully completed an ATC program during the first 11 months of 2015. Approximately one third of these participants opted to remain in residential treatment following their release from custody. Although not currently available, the rate of recidivism for this group will be studied in the coming year.

• Mindfulness Based Stress Reduction and Interpersonal Psychotherapy: One of the County's step-down providers indicated that using Mindfulness Based Stress Reduction (tailored for substance abuse) and Interpersonal Psychotherapy have been useful. In the last three months, the program that implemented these models was able to retain 7 out of 12 AB 109 clients in placement. These individuals are now going to Phase III of the six month program. These are the hardest to place due to previous multiple relapses. There are also two clients who left during Phase II and are now back on Phase I. That makes a total of 9 out of 14 clients that were maintained due to these treatment models.

• Other Effective Approaches: An outpatient provider indicated that evidence-based Assessment, Crisis Intervention, Trauma Treatment (ACT), Critical Time Intervention (CTI), Motivational Interviewing, Dialectical Behavioral Treatment, and Recovery Centered Clinical System (RCCS) intervention have been effective. The provider reports a 20% recidivism rate, which compares favorably against a national statistic of 67%.

• Co-located Assessment Services: DPH-SAPC has shown positive outcomes through co-located assessment services at dedicated Probation HUBs to improve engagement into SUD treatment. The implementation of co-located assessment services has increased the show rate for assessment to 96%. Prior to Community Assessment Services Center (CASC) co-location, the show-rate for assessments was approximately 50%. The one-stop approach has provided post-release supervised participants the ability to be assessed, engaged and referred to SUD treatment services upon their initial check-in with Probation.
<table>
<thead>
<tr>
<th>Community Corrections Partnership Membership (November 2, 2015)</th>
</tr>
</thead>
</table>
| **Rick Dupree**  
Chief Probation Officer |
| **Amy Downey**  
Presiding judge or designee |
| **Kevin Fries**  
County supervisor or chief administrative officer or designee |
| **David Linn**  
District Attorney |
| **Mike Fitzgerald**  
Public Defender |
| **Jay Varney**  
Sheriff |
| **Steve Frazier**  
Chief of Police |
| **Kelly Woodward**  
Department of Social Services |
| **Dennis Koch**  
Department of Mental Health and Alcohol and Substance Abuse Programs |
| **Vacant**  
Department of Employment |
| **Cecilia Massetti**  
Office of Education |
| **Mike Unger**  
Community-based organization |
| **Matti Mendez**  
Victims’ interests |

### Madera County

#### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th><strong>Goal:</strong> Implement a Positive and Violation Response Grid</th>
</tr>
</thead>
</table>
| **Objective:**  
- To have better efficiency and consistency in case management while targeting specific behaviors (positive & negative)  
- Reducing the impact on the courts and jail |
| **Measure:**  
- Reduce quantity and severity of violations  
- Reduce court hearings for violations  
- Reduce jail time for violations |

<table>
<thead>
<tr>
<th><strong>Goal:</strong> Improve success rates of offenders under supervision, resulting in less victimization and increased community safety</th>
</tr>
</thead>
</table>
| **Objective:**  
- Implementation of a system that promotes public safety and utilizes best practices in recidivism reduction  
- Implementation of a system that effectively uses alternatives to pre-trial and post-conviction incarceration where appropriate |
| **Measure:**  
- Partner feedback on effectiveness of mechanisms in place to collaboratively address realignment issues as they arise  
- Recidivism rates for non-violent, non-serious and non-sex offenders  
- Number and type of offenders sentenced to county jail, to probation or alternative programs and successfully completing Post-Release Community Supervision |

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- Madera County Superior Courts: $81,000
- Chowchilla Police Department: $175,000
- Behavioral Health: $110,000
- District Attorney: $150,000
- Cuimmo & Associates (Public Defender): $100,000, $88,288
- Madera Police Department: $175,000, $185,762
- Sheriff Department: $225,000, $118,555
- Department of Corrections: $1,900,000, $1,990,810
- Probation Department: $1,525,000, $1,153,776

FY 2015-16 - $6,216,228
FY 2014-15 - $4,707,635

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- State Center Community College: $2,813
- Madera County Workforce Investment Board: $123,810, $95,941
- Department of Corrections In-custody services: $411,000, $200,000

FY 2015-16 $534,810
FY 2014-15 $298,754
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- The Clay Transitional Living Program: $200,000
- Big Brothers Big Sisters: $50,000
- Behavioral Intervention Inc Alternatives to Incarceration: $55,000
- West Care Treatment Program: $100,000 (FY 2015-16), $30,880 (FY 2014-15)
- Valley Educational Services: $5,000 (FY 2015-16), $1,272 (FY 2014-15)
- Turning Point Treatment Program: $100,000 (FY 2015-16), $71,030 (FY 2014-15)
- Spirit of Woman Residential Treatment: $40,000 (FY 2015-16), $33,899 (FY 2014-15)
- Madera Rescue Mission Faith-Based Residential Program: $100,000 (FY 2015-16), $100,000 (FY 2014-15)
- Central Counseling: $15,000 (FY 2015-16), $10,564 (FY 2014-15)
- Behavioral Intervention Inc Electronic Monitoring: $31,984
- Behavioral Intervention Inc DRC: $474,000 (FY 2015-16), $474,000 (FY 2014-15)
- Angel's Touch Outreach: $100,000 (FY 2015-16), $84,925 (FY 2014-15)
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No

*The county declined to respond to the remaining optional questions.*
## Marin County

### Goals, Objectives, Outcome Measures and Progress

#### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase the number of clients successfully completing Post-Release Community Supervision (PRCS) and Mandatory Supervision (MS) in Marin County</td>
<td>90% of PRCS and MS cases will successfully complete their program with no new felony or misdemeanor citations</td>
<td>Number of clients completing their PRCS and MS program with no new felony or misdemeanor convictions</td>
<td>In FY 2014-15, Marin County Probation had 46 PRCS and MS clients terminate from the program. 91% of those clients completed their term of supervision successfully with no new felony or misdemeanor conviction</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Connect participants with appropriate services to aid in rehabilitation and re-entry into the community</td>
<td>Assess 100% of clients using a biopsychosocial assessment tool</td>
<td>Number of clients assessed</td>
<td>100% of clients released to Marin County Probation in PRCS or MS statuses were assessed and referred to appropriate services</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximize funding and services for clients newly eligible for Medi-Cal benefits under the Affordable Health Care Act</td>
<td>Work with providers and partners to meet requirements to bill for service reimbursement under the Drug Medi-Cal waiver program</td>
<td>Percent of eligible clients enrolled in Medi-Cal</td>
<td>Marin is a Drug Medi-Cal Waiver County and actively working with our providers to become Medi-Cal reimbursable</td>
</tr>
<tr>
<td></td>
<td>Assist all eligible clients in enrolling in Medi-Cal</td>
<td>Percent of treatment costs reimbursed by Medi-Cal</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Percent of eligible clients enrolled in Medi-Cal</td>
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<td></td>
</tr>
</tbody>
</table>

### Community Corrections Partnership Membership

(October 2, 2015)

- **Michael Daly**
  - Chief Probation Officer

- **James Kim**
  - Presiding judge or designee

- **Ralph Hernandez**
  - County supervisor or chief administrative officer or designee

- **Edward Berberian**
  - District Attorney

- **Jose Varela**
  - Public Defender

- **Robert Doyle**
  - Sheriff

- **Diana Bishop**
  - Chief of Police

- **Heather Ravani**
  - Department of Social Services

- **Suzanne Tavano**
  - Department of Mental Health

- **Racy Ming Copley**
  - Department of Employment

- **D.J. Pierce**
  - Alcohol and Substance Abuse Programs

- **Mary Jane Burke**
  - Office of Education

- **Vacant**
  - Community-based organization

- **Vacant**
  - Victims’ interests

The CCP meets semi-annually
FY 2014-15: Total funding received was $5,063,075 with $1,242,476 put into reserves.

FY 2015-16: Total funding received was $7,886,528 including a one time stabilization fund of $1,471,374. $3,403,623 was put into reserves.

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

All public funding goes to services and program staff performing direct services.
<table>
<thead>
<tr>
<th>Program</th>
<th>FY 14-15 - $1,234,314</th>
<th>FY 15-16 - $1,397,460</th>
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<tbody>
<tr>
<td>Community Action Marin</td>
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<tr>
<td>UCSF Forensic Mental Health Services</td>
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<td>The Vines</td>
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<td>Intensive Outpatient Treatment</td>
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<td>Bay Area Community Resources</td>
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<tr>
<td>Leaders in Community Alternatives (LCA)</td>
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</table>
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the County did an internal review of programs, services and outcomes in October of 2014. At the March 2015 meeting of the CCP, the Executive Board agreed to pursue program evaluation by an outside party. CCP staff are currently researching agencies that are positioned to provide such a review and hope to have a proposal before the CCP Board in early 2016.

Does the county consider evaluation results when funding programs and/or services?

Yes, applications to the CCP Funding Committee require the requester to identify the population to be served, expected outcomes, and how the request supports the CCPs goals of being data driven and evidence-based. New programs without proven success are often funded for a single program year as pilot and must return to the Executive Board with outcomes to justify ongoing funding.

Does the county use BSCC definitions when collecting data? If so, which?

The county declined to respond to this question.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. Marin County provides a continuum of care and support services that all embody the philosophy of evidence-based practices. Funding proposals must adhere to evidence-based practices to be approved.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Marin County provides a high-level of services to the AB 109 population. While in-custody, clients are able to access substance abuse treatment, cognitive behavioral programming and mental health assessment and counseling. The Jail Re-entry Team works with all clients prior to release to ensure enrollment in Medi-cal and county support programs such as general assistance and food benefits. Upon release we ensure all clients have a roof over their heads. For some this may be with family for others we place based on their current situation and engagement in a shelter, Supportive Living Environment (SLE) or Inpatient Treatment Program. All clients are placed into Intensive Outpatient Treatment and additional counseling, mental health services and treatment modalities are offered based on client needs. Probation Officers and staff of the Marin Employment Connection work closely with the clients to assist them in pursuing education training and gainful employment.

What challenges does your county face in meeting these programming and service needs?

Although located in the progressive Bay Area, the high cost of housing and real estate in Marin limits the number of treatment providers who can afford to set-up shop in Marin and to retain qualified staff. It is anticipated that the County may begin to provide direct treatment services in 2015-16 to provide increased treatment options.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

With the availability of funding and a small client population in the first years of the program we were too lenient and generous with providing funds to offset many client needs (treatment, housing, transportation, living assistance). Support was provided without clear expectations from clients in return for this support. This resulted in client entitlement and many clients nearing the end of their term of supervision without having developed a plan for sustenance once the Probation Department terminates their support. All client funding requests are now tied to case plan goals and outcomes. Clients are expected to take on an increasing co-pay for treatment and housing payments that results in the client making 100% of payments at the one year mark.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In 2014, Marin County implemented a pilot health coverage application assistance program. Partnering with Sonoma County, funding was secured for a Certified Enrollment Counselor from an established non-profit, community-based organization to provide application assistance approximately 12 hours per week in Marin County. The Certified Enrollment Counselor coordinates with staff members from Marin County Probation, Human Services and Sheriff’s Department to identify persons involved in the justice system who need assistance in procuring health insurance and services.

As of January 2015, health coverage application services were extended to all inmates at Marin County Jail. Marin County developed a process whereby the Sheriff’s Office staff would provide the Certified Enrollment Counselor with lists of inmates who are within 60-days of their release dates. From this list, which included those scheduled for release to Probation, inmates were screened for Medi-Cal, and those without active benefits were met with prior to release. Direct referrals made by Marin County Jail and Probation Department staff members by appointment supplemented the list to provide additional enrollment opportunities.

A sample of these services provided by the Certified Enrollment Counselor includes:

- Scheduling doctor’s appointments for clients
- Providing bus passes (with bus route information) to applicants for their initial doctor’s appointment
- Screening for and assisted with preparing a CalFresh application for submission to Marin County Health and Human Services when eligible (i.e., post-release or same-day)
- Creation of an “Understanding your Medi-Cal benefits card in Marin County” specifically for Marin County’s justice-involved populations. This card - which is smaller than a credit card when folded - contains all health coverage-related information, such as:
  a) The applicant’s Medi-Cal identification information (C.I.D.), which facilitates same-day pharmacy pick-up and doctor’s appointments;
  b) Health Center contact information for each center in Marin County that accepts Medi-Cal;
  c) Information on how to choose a doctor, how to report changes to their case, and
  d) Hot-line and services contact information—including mental health and homeless services access.
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# Community Corrections Partnership Membership

(November 2, 2015)

**Pete Judy**  
Chief Probation Officer

**Dana Walton**  
Presiding judge or designee

**John Carrier**  
County supervisor or chief administrative officer or designee

**Thomas Cook**  
District Attorney

**Neal Douglas**  
Public Defender

**Doug Binnewies**  
Sheriff

**Vacant**  
Chief of Police

**Chevon Kothari**  
Department of Social Services, Department of Mental Health and Alcohol and Substance Abuse Programs

**Vacant**  
Department of Employment

**Robin Hoper**  
Office of Education

**Alison Tudor**  
Community-based organization

**Laura Smith**  
Victims’ interests

---

## Mariposa County

### Goals, Objectives, Outcome Measures and Progress

#### FY 2014-15

<table>
<thead>
<tr>
<th>Goal: Expand the Probation Works Program</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Provider to assist with employment skill development</td>
</tr>
<tr>
<td>• Get Board approval to create job classification at landfill for probationers</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• Memorandum of Understanding with community-based provider to provide vocational and employment-based skills</td>
</tr>
<tr>
<td>• Board approves new job classification for new position at landfill</td>
</tr>
<tr>
<td><strong>Progress:</strong> The Board of Supervisors approved a new position at the landfill for probationers in the Probation Works Program that pays minimum wage for program participants. The program is scheduled to begin in late 2015.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Expand the jail to create program and bed space for low-level offenders in the jail</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Get Board of Supervisors authorization to move forward with Jail Expansion Project</td>
</tr>
<tr>
<td>• Enter into contract for building construction</td>
</tr>
<tr>
<td>• Identify funding source</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• Plans to be completed</td>
</tr>
<tr>
<td>• Board of Supervisors to grant authorization to complete project</td>
</tr>
<tr>
<td>• Funding obtained for the estimated cost of the project</td>
</tr>
<tr>
<td><strong>Progress:</strong> The plans have been completed. The Board of Supervisors has given authorization to start the process. Staff are currently meeting with BSCC and other state officials to get the plan approved.</td>
</tr>
</tbody>
</table>

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- Planning Department: $16,000 - $15,000
- District Attorney: $10,000 - $10,000
- Sheriff: $25,000 - $24,000
- Probation Department: $45,000 - $45,000

FY 2015-16: $96,000, FY 2014-15: $94,000

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Probation: Electronic Monitoring: $10,000 - $10,000
- Probation: Work Program: $7,500
- Probation: Homeless Services: $20,000 - $20,000
- District Attorney Victim Witness: $10,000 - $10,000

FY 2015-16: $75,000, FY 2014-15: $47,500

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15 and 2015-16, $245,000 was allocated to Alliance for Community Transformations.
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, we contracted this past year for a study from a group affiliated with the University of California at Merced.

Does the county consider evaluation results when funding programs and/or services?

Yes and no. Some services have been eliminated and others put into place based on initial findings. One of our major goals was to put into place alternative sentencing options so that our jail population would not increase. For instance, we know that the Probation Works Program that is now used for probation violations option has reduced the number of bed days occupied by probation violators. We continue to fund that program.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

We have a drug court partially funded by a federal grant. We have no in-county drug treatment residential programs; therefore any one needing this type of program must go out of county. We have no in-county psychiatric or psychologist practitioners so the availability is very limited. Most psychiatric needs are met through video conference visits or travel out of county. We contract with a local non-profit who provides most of our lower level substance abuse and counseling case management services. We have a program that offers drug and alcohol recovery services. The local churches have been offering homeless shelter services that provide housing and meals to many individuals with substance and mental health issues. We have one hospital in county that struggles financially. The emergency room there provides services to many of those with mental health and substance abuse problems.

What challenges does your county face in meeting these programming and service needs?

As noted in prior responses, due to our size of county we lack any local mental health resources at the Ph.D or MD level. Also while our county mental health and human services director is supportive, the low pay structure in our rural county is such that it is difficult to hire the professionals needed even though the county has allocated those positions. Nearby counties pay substantially more for these professionals so it is difficult to hire and retain higher-level service providers. This same issue is present at the law enforcement and probation services. There is only one local law enforcement agency and that is the sheriff. Both agencies have a difficult time recruiting and retaining officers due to the low pay. As those responsible for assessing and assisting those with these issues oftentimes at initial contact it is important that the front door workers are a well trained workforce capable of
making good decisions. The lack of transportation is a major issue in providing services. There are limited options for public transportation and geographic and distance hurdles to go along with the ability to access services. Our current jail was built in the 1990's and is a dorm style arrangement. It does not have the ability to properly segregate low-level offenders from high-risk offenders. It also lacks building space that was designed for providing counseling and education programs. We are in the process of attempting to add through construction of a new module 12 beds for low-level offenders that will have a classroom attached to it. We face the challenges that go with all the regulations, not to mention the funding, that goes with that endeavor.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Prior to AB 109, the sanction most often used for probation violations was the use of jail time. We knew that in order to keep our jail average daily population numbers manageable we needed to put some alternative sanctions in place. One of those has been the implementation of our Probation Works Program. Instead of being ordered by the court to jail, violators are ordered to perform work at the local county landfill. The landfill has work that needs to be performed that is manual in nature and low skill. It also lacks the resources to get the work completed. Probation violators now perform much-needed work benefiting the county while also holding the probation violator accountable. The court has also used the program for low-level offenders as an original sanction option instead of jail time.
Mendocino County

The CCP did not provide goals for FY 2014-15 or 2015-16

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheriff's Office</td>
<td>$1,208,525</td>
<td>$1,208,525</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$751,835</td>
<td>$690,023</td>
</tr>
<tr>
<td>Other</td>
<td>$61,096</td>
<td></td>
</tr>
<tr>
<td>Superior Court</td>
<td>$53,559</td>
<td>$10,712</td>
</tr>
<tr>
<td>City of Ukiah Police Department</td>
<td>$125,000</td>
<td>$125,000</td>
</tr>
<tr>
<td>Public Defender</td>
<td>$120,093</td>
<td>$93,093</td>
</tr>
<tr>
<td>District Attorney</td>
<td>$127,505</td>
<td>$115,965</td>
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<tr>
<td>Health &amp; Human Services Agency</td>
<td>$215,147</td>
<td>$193,220</td>
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<tr>
<td>Executive Office</td>
<td>$73,335</td>
<td></td>
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<tr>
<td>Other</td>
<td>$61,096</td>
<td></td>
</tr>
</tbody>
</table>

The CCP meets monthly
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Video Conferencing: $48,500
- Alcohol and Other Drug Program Counselor: $65,662 (FY 14-15) / $56,052 (FY 15-16)
- Ankle Bracelets for Home Monitoring: $36,000 (FY 14-15) / $36,700 (FY 15-16)

FY 2014-15 and 2015-16 allocations include carryovers from prior years.

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- Northern California Construction Pre-Apprenticeship Training Program: $95,000
- Ford Street Shelter Beds: $24,000
- Ford Street Detox in Lieu of Jail Program: $20,000 (FY 15-16) / $15,000 (FY 14-15)
- Ford Street Vocational Treatment Program: $90,000 (FY 15-16) / $135,850 (FY 14-15)
- Sex Offender Treatment Project: $18,500
- B.I. Day Reporting Center: $360,000

FY 2015-16 $299,647  FY 2014-15 $229,920
FY 2015-16 $589,000  FY 2014-15 $529,350

The county declined to respond to the optional questions.
The CCP did not provide goals for FY 2014-15 or 2015-16

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Attorney</td>
<td>$145,923</td>
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<tr>
<td>Public Defender</td>
<td>$144,156</td>
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<tr>
<td>DA Victim Witness</td>
<td>$84,827</td>
<td>$82,873</td>
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<tr>
<td>Sheriff Department</td>
<td></td>
<td>$2,904,678</td>
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<tr>
<td></td>
<td></td>
<td>$2,617,000</td>
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<tr>
<td>Probation Department</td>
<td></td>
<td>$3,264,970</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$2,575,540</td>
</tr>
</tbody>
</table>

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- No AB 109 funds were expended to public agencies to provide counseling services to the adult clients supervised by the Probation Department. Mental Health and Alcohol and Drug Services were available, but personnel and services were provided in-kind by public agencies in Merced County.
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- BI, Inc. Jail Re-entry IC Program: $440,000
- BI, Inc. Warrant Reduction Program: $75,000
- Comm Social Model Advocates - Residential Tx: $80,000
- BI, Inc. GPS/ Electronic Monitoring: $263,206
- BI, Inc. Day Reporting Centers: $769,000

FY 2015-16: $1,627,206
FY 2014-15: $808,000
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, recidivism and local crime rates are evaluated.

Does the county consider evaluation results when funding programs and/or services?

Yes, the success rates of programs are considered.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%—Probation Services 61-80%. Other Public Agencies 21-40%.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Mental Health Department - Alcohol and drug services and Mental Health Court
- Social Service Department - Life Skills
- Behavioral Interventions, Inc. - Day Reporting Centers (2) and Jail Re-entry program that includes drug treatment and Cognitive Behavioral Therapy
- Department of Child Support - linkage to services to assist with child support
- Library - literacy program
- Workforce Investment - job readiness and finding

What challenges does your county face in meeting these programming and service needs?

Qualified personnel and increased personnel costs. Merced is an economically challenged county. Typically first into a recession and last out of a recession. The county is still recovering from recession, which resulted in over 30% general fund reductions just prior to implementation of AB 109.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Jail Re-entry program is somewhat unique. Modeled after programs in Napa and Santa Cruz Counties, it is providing clients with intensive services in-custody and linkage to community services upon release.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Leadership for Life Program is a skills-based program creating by the County's Social Services Department and facilitated by former clients. A project is underway to establish the program as evidence-based for reducing recidivism.
Goals, Objectives, Outcome Measures and Progress
FY 2014-15

Modoc County

Goal: Community Safety

Objective: • Development of a jail facility that is safe for inmates and staff and provides for the safe and effective delivery of services
• Accurate identification, assessment and targeting of services to offenders using the Static Risk and Offender Needs Guide (STRONG) R&N Assessment
• Use of evidence-based tools and approaches in treatment, supervision and sentencing of offenders

Progress: STRONG is being used for all offenders by probation officers. Treatment providers are being trained in Cognitive Behavioral Therapy, motivational interviewing (MI) and trauma-focused

Goal: Reduce Recidivism

Objective: • Use research and evidence-based tools to identify criminogenic needs of offenders and develop targeted interventions
• Enhance community-based programming for low-risk offenders and those at-risk of criminal behavior

Progress: Parenting classes, mental health counseling, and substance use groups are provided to inmates by outside service providers and jail Correctional officers are using Pathways to Living Program

Goal: Enhanced Collaboration

Objective: • Increase access to evidence-based services and supports by promoting evidence-based training opportunities for all CCP members
• Regularly measure and assess data and programs and use the results for program improvement

Progress: Services for inmates have increased and planning has begun for services to offenders in the community

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- Reserve Account: $43,548
- Superior Court: $12,000
- Behavioral Health Services: $10,920
- Alturas Police Department: $5,000
- Sheriff Department: $154,208
- Probation Department: $48,830

FY 2015-16: $274,506
FY 2014-15: $254,900

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Care and Support of Offenders on Supervision: $15,000
- Batterer Intervention Program: $28,000
- Electronic Monitoring: $5,080
- STRONG Risk & Needs Assessment: $750
- Contract Services for New Jail Application: $27,500
- In-Custody Services: $144,208

FY 2015-16: $203,958
FY 2014-15: $254,900
## FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Organization</th>
<th>FY 2015-16 Allocation</th>
<th>FY 2014-15 Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.O. Consulting &amp; Counseling Services: Mental Health Counseling in jail</td>
<td>$34,320</td>
<td></td>
</tr>
<tr>
<td>T.E.A.C.H. Inc. Parenting Class (in jail)</td>
<td>$4,000</td>
<td>$4,000</td>
</tr>
<tr>
<td>T.E.A.C.H. Inc. Psychological Testing</td>
<td>$5,000</td>
<td></td>
</tr>
</tbody>
</table>
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Modoc County Behavioral Health Services offers group and individual services for substance use, mental health and co-occurring as well as case management services.
- T.E.A.C.H., Inc. offers Parenting Classes in the jail and to the community. They also provide emergency housing, heating and food as well as services and advocacy for victims of Domestic violence and sexual assault.
- A.O. Consulting and Counseling Services offers mental health counseling in the jail.
- Jail staff are using Pathways to Living.

What challenges does your county face in meeting these programming and service needs?

Biggest challenges are our very small population (9400) and very large area to serve (4500 square miles). We have difficulty attracting competent professionals.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
**Mono County**

**Goals, Objectives, Outcome Measures and Progress**

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Increase substance abuse treatment in Mono County</th>
</tr>
</thead>
</table>
| **Objective:** | • 100% of participants will receive screening for treatment  
• 100% of in-custody clients will receive screening and treatment |
| **Measure:** | Number of participants enrolled in treatment |
| **Progress:** | Progress towards this goal has been achieved and remains ongoing |

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Repair and enhance communications systems</th>
</tr>
</thead>
</table>
| **Objective:** | • 100% of vendors will be selected  
• 100% of equipment will be compatible with all systems  
• 100% of equipment will be compatible with Probation's new caseload management system |
| **Measure:** | Number of approved vendors  
• All systems compatible |
| **Progress:** | Completed and being reviewed for compliance and upgrade with SAFECOM measures |

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Provide a transition house for AB 109 offenders</th>
</tr>
</thead>
</table>
| **Objective:** | • 100% of releases will be transitioned through the transition house  
• 100% will receive counseling, work assistance and other needs using a transition plan |
| **Measure:** | Number of releases admitted to transition house  
• Number of programs, education and counseling attended |
| **Progress:** | Ongoing |

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

FY 2015-16 allocation includes carryover funds from prior fiscal years.

FY 2014-15 and 2015-16 Allocations to Public Agencies for Programs & Services

FY 2014-15 and 2015-16 Allocations to Non-Public Agencies for Programs & Services
- Mono County does not have non-public agencies for programs and services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The county declined to respond to this question.

Does the county consider evaluation results when funding programs and/or services?

The county declined to respond to this question.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The only services provided are those made available by county government such as electronic monitoring, counseling, transition services, community support, housing and other critical services. Because of the level of funding, Mono cannot entice outside agencies to provide services in a rural, isolated and weather-challenged area. In effect, probation, social services, health and behavioral health provide direct services.

What challenges does your county face in meeting these programming and service needs?

As mentioned above. The amount of AB 109 funds, while determined by other factors, does not consider the difficulties encountered by isolated rural communities. We have been setting funds aside to be able to renovate a house to be used for transition. Most other counties have these services already. Additionally, consideration must be given to smaller communities where county government provides for all services as opposed to those that can use community-based organizations. It places a higher workload on employees than similarly situated employees in medium to large counties. Finally, while the population of the county appears to be one of the variables used in funding, this estimate does not consider the level of visitation by tourists. Mono County has a permanent population of approximately 14,200 residents and a seasonal or transient population that reaches close to 30,000. Throughout the summer and winter months, visitors push those numbers to over 60,000 on a regular basis and over 3,000,000 annually due to tourism (skiing, hiking, fishing, visits to Yosemite, etc.). The increase stresses the criminal justice system.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.
Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
## Monterey County

### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Establish transitional housing for high-risk male offenders who are homeless</strong></td>
<td>- Open two transitional houses for services to high-risk male offenders who are homeless</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Create eligibility criteria for selection of clients</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Staff program with case manager</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Opening of both houses</strong></td>
<td><strong>Percent of house capacity used</strong></td>
<td><strong>Both houses have remained at 100% capacity</strong></td>
</tr>
<tr>
<td><strong>Continue to enhance public safety by providing support services to transitional housing clients</strong></td>
<td>- 50% of housing clients will attend in-house Life Skills group meetings</td>
<td>- Number of transitional housing clients who are employed or attending the DRC</td>
<td>Average attendance for life skills is 80 to 90%; 92% of clients are employed or attending the DRC</td>
</tr>
<tr>
<td></td>
<td>- 90% of housing clients will be employed, full-time students or attending day reporting center (DRC) services</td>
<td>- Number of clients who are participating in Life Skills group meetings</td>
<td></td>
</tr>
<tr>
<td><strong>Continue to enhance public safety by expanding housing resources</strong></td>
<td>- Create more opportunities for securing affordable housing for AB 109 involved offenders</td>
<td>- Increase the number of potential housing opportunities/landlords willing to provide housing to AB 109 offenders by 25%</td>
<td>The housing case manager through Turning Point currently has a database of 33 housing options/landlords</td>
</tr>
</tbody>
</table>

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### The CCP meets quarterly
**Goal:** Continue to enhance public safety by increasing timely access to services by expanding substance use provider contracts

**Objective:** • Work towards implementing new substance use waiver and service delivery system

**Measure:** • Begin new Request for Proposals process in the next 6 months

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**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheriff</td>
<td>$5,049,004</td>
<td>$5,168,753</td>
</tr>
<tr>
<td>Probation - Service Administrator</td>
<td>$2,195,040</td>
<td>$2,263,140</td>
</tr>
<tr>
<td>Public Defender</td>
<td>$38,000</td>
<td></td>
</tr>
<tr>
<td>District Attorney</td>
<td>$389,390</td>
<td>$87,744</td>
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<tr>
<td>Office of Employment and Training</td>
<td>$395,675</td>
<td>$389,390</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>$1,362,344</td>
<td>$1,311,803</td>
</tr>
<tr>
<td>Probation</td>
<td>$3,523,947</td>
<td>$3,766,091</td>
</tr>
</tbody>
</table>

- **FY 2015-16 - $12,855,898**
- **FY 2014-15 - $12,777,510**
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

Data Collection and Evaluation
- FY 2015-16: $365,331, $416,426
- FY 2014-15: $87,744, $82,477

Victim Services
- FY 2015-16: $579,702
- FY 2014-15: $529,161

Treatment
- FY 2015-16: $395,675
- FY 2014-15: $389,390

Employment
- FY 2015-16: $340,760
- FY 2014-15: $316,921

Supervision
- FY 2015-16: $3,400,760
- FY 2014-15: $3,166,921

Public Defender
- FY 2015-16: $38,000
- FY 2014-15: $38,000

In-Custody Services
- FY 2015-16: $4,920,936
- FY 2014-15: $5,040,685

FY 2015-16 $9,750,148  FY 2014-15 $9,663,060
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>GEO Re-Entry Services, LLC</td>
<td>$1,080,000</td>
<td>$1,080,000</td>
</tr>
<tr>
<td>Sun Street Centers</td>
<td>$185,016</td>
<td>$185,016</td>
</tr>
<tr>
<td>Community Human Services</td>
<td>$177,837</td>
<td>$177,837</td>
</tr>
<tr>
<td>Door to Hope</td>
<td>$115,819</td>
<td>$115,819</td>
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<tr>
<td>The Village Project, Inc.</td>
<td>$148,254</td>
<td>$148,254</td>
</tr>
<tr>
<td>Behavioral Interventions, Inc.</td>
<td>$1,080,000</td>
<td>$1,080,000</td>
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<tr>
<td>Interim, Inc.</td>
<td>$121,049</td>
<td>$121,049</td>
</tr>
<tr>
<td>Rancho Cielo, Inc.</td>
<td>$217,463</td>
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</tr>
<tr>
<td>Valley Health Associates</td>
<td>$34,667</td>
<td>$34,667</td>
</tr>
<tr>
<td>Rennaissance Resources West</td>
<td>$42,000</td>
<td>$42,000</td>
</tr>
<tr>
<td>Turning Point of Central California</td>
<td>$685,777</td>
<td>$685,777</td>
</tr>
<tr>
<td>Transitions for Recovery and Re-Entry</td>
<td>$42,000</td>
<td>$178,500</td>
</tr>
<tr>
<td>Introspect</td>
<td>$128,068</td>
<td>$128,068</td>
</tr>
</tbody>
</table>

- FY 2015-16: $3,105,750
- FY 2014-15: $3,114,450
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definition for treatment program completion rates

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%.

- Day reporting center staff and Behavioral Health staff are using evidence-based curriculum and have regular audits and training for staff to ensure fidelity.
- Probation officers are using evidence-based curriculum in a group setting and have regular audits and training for staff to ensure fidelity.
- Most other programs are utilizing evidence-based practices like motivational interviewing but are not utilizing evidence-based curriculum and do not have regular training sufficient to keep staff trained or ensure fidelity.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

1. Short term (30 days) re-entry program on-site at the probation department
2. Behavioral Health services; assessment, on-site psychiatric services, psychotropic medication, outpatient and inpatient substance abuse programs, outpatient and inpatient mental health programs, supportive services, methadone, case management
3. Day Reporting Center
4. Emergency housing, transitional housing, case management and referral services, financial help in obtaining housing (rent, deposit)
5. On-site monthly meeting for clients to access information and services from service providers
6. Employment services; county services and two private employment services; employment workshops, job training, job readiness, on the job training, subsidized employment, technical training
7. Alternative to detention strategies
8. Co-located services at our Re-entry Services Center

What challenges does your county face in meeting these programming and service needs?

- Limited, diminishing funding sources
- Ongoing training needed in using evidence-based practices and best practices for private agencies due to lack of knowledge and staff turnover
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Our housing services have gradually increased since the beginning of realignment. We initially offered case management for homeless offenders to provide them help in finding affordable housing, potential financial support to pay for overnight motel fees, rent or deposit fees for rental units and placement in local shelters. As we observed need, we expanded services to include six month transitional housing and have been able to see the benefits of stable housing. It has allowed for better opportunities to intervene in high-risk behaviors and it has allowed more opportunities for program participation and employment.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We have gradually expanded services to the clients living in transitional housing. Two houses were established in October 2014, each housing 6 men. Since that time, we have expanded services targeting long term success. We started a journaling group in the house that is led by two probation officers. The groups are held in the house one time per week during the evening and all residents present must attend. Additionally, offenders residing in the homes who are not employed or attending school full-time must attend the day reporting center, if appropriate. The goal of these services is to intervene on negative behaviors that will reduce their chance for success in this residential group setting and to provide cognitive therapy, increased employment opportunities and structured time.

While we have not been able to determine long term outcomes for this program, the probation officers and clients have expressed that having stable housing where supportive services can be delivered has helped in the success of the offenders.
Napa County

Goals, Objectives, Outcome Measures and Progress
FY 2014-15

Goal: Increase the number of participants in mental health court

Objective: • Increase the number of participants from 5 to 15

Measure: • Number of participants in mental health court

Progress: Improved participants numbers from 5 to 11

Goals, Objectives, Outcome Measures and Progress
FY 2015-16

Goal: Increase the number of high-risk offenders receiving cognitive behavior programs

Objective: • Enroll 60% of high-risk offenders in programs

Measure: • Number of offenders enrolled in cognitive behavior programs
• Number of offenders completing cognitive behavior programs

Goal: Increase the number of high-risk offenders assessed with substance abuse as top 3 criminogenic need receiving treatment

Objective: • 70% enrolled in treatment either residential or outpatient

Measure: • Number of offenders enrolled in outpatient treatment
• Number of offenders enrolled in residential treatment
• Number of offenders completing program

The CCP meets bi-monthly
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Attorney (victim services)</td>
<td>$972,670</td>
<td>$925,000</td>
</tr>
<tr>
<td>Napa County Detention Center</td>
<td>$182,565</td>
<td>$110,356</td>
</tr>
<tr>
<td>Alcohol and Drug Services</td>
<td>$65,445</td>
<td>$65,445</td>
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<tr>
<td>Mental Health</td>
<td>$210,708</td>
<td>$182,565</td>
</tr>
<tr>
<td>Probation</td>
<td>$914,734</td>
<td>$656,282</td>
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</table>

FY 2015-16 $3,129,357  FY 2014-15 $2,856,781

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse Counselor embedded in Probation</td>
<td>$110,356</td>
<td></td>
</tr>
<tr>
<td>Community Corrections Work Program</td>
<td>$125,000</td>
<td></td>
</tr>
<tr>
<td>Mental Health Court</td>
<td>$105,354</td>
<td>$99,445</td>
</tr>
<tr>
<td>On-Call Probation Program</td>
<td>$17,633</td>
<td>$31,840</td>
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<tr>
<td>Home Detention Program</td>
<td>$61,236</td>
<td>$60,415</td>
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<tr>
<td>Pre-Trial Release Program</td>
<td>$151,466</td>
<td>$127,152</td>
</tr>
<tr>
<td>Electronic Monitoring</td>
<td>$35,000</td>
<td>$18,000</td>
</tr>
<tr>
<td>Deferred Entry of Judgment Program</td>
<td>$97,792</td>
<td>$125,228</td>
</tr>
</tbody>
</table>

FY 2015-16 $578,837  FY 2014-15 $587,080

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15 and 2015-16, $49,321 and $55,000 respectively was allocated to the McAllister Institute for residential beds.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, convictions and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%. The County's Community Correction Service Center (day reporting) is evidence-based programming (EBP) but is funded by county general fund-not realignment funds.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Mental Health Services
- Jail Services
- Psychiatric Services
- Case Management
- Counseling/Therapy
- Mental Health Court

Substance Abuse Services
- Drug Court
- Detox Services
- Residential Services
- Outpatient Services
- Counselor embedded in Probation

Cognitive Behavioral Services
- Moral Reconation Therapy™
- Thinking for a Change
- Cognitive behavioral groups (NCTI and Change Company curriculums)

What challenges does your county face in meeting these programming and service needs?

A shortage of residential beds can keep someone in jail longer while waiting for a vacancy. We need to increase the number of cognitive behavioral groups run so more offenders can get services sooner.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Staff Secure Facility/Re-entry Program: the county is in the process of building a 72 bed re-entry program (a type IV-facility) that will release inmates from the jail to provide services, programs and assist with housing once released fully from custody.

Napa continues to train all criminal justice partners in evidence-based practices so new staff to any of the departments has the same training and expectations.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Graduates of the Community Corrections Service Center continue to show positive outcomes. The program began in 2009. Graduates continue to have a 24% recidivism rate. This rate is based on continuing to track each graduate even after off probation. Graduates are reviewed for both new offenses and violations of probation. It was determined we would take a stricter view of recidivism for this project since we promised community leaders that if the program did not work, we would not continue to operate.
Nevada County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

Goal: Establish a Re-entry Work Program

Objective: • Find employers willing to work with AB 109 offenders
          • Develop a "Successful Connections" workgroup

Measure: • List of employers in Nevada County willing to work with AB 109 offenders
          • Number of successful connections events held

Progress: Meetings with potential local employers have occurred, follow-ups will continue

Goal: Establish further housing for AB 109 offenders

Objective: • Increase database of housing options
          • Reduce or eliminate involuntary homelessness

Measure: • Directory of housing options for transient clients
          • Number of involuntary homeless

Progress: The county has a homeless shelter and three options for sober living with a potential fourth

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Contract with Northern California Construction Training (NCCT)

Objective: • Establish NCCT in Nevada County
          • Funnel clients who meet criteria through the program
          • Increase employment of clients who graduate the program

Measure: • Have at least 15 AB 109 clients in the program at all times
          • Clients are engaged in gainful employment after successful completion of the NCCT program

Progress: Contract with NCCT up for Board of Supervisors (BOS) approval at next scheduled meeting
**Goal:** Develop programs within the jail

**Objective:**
- Have Cognitive Behavioral Therapy (CBT) and Moral Reconciliation Therapy™ (MRT™) groups at the jail
- Clients complete CBT/ MRT™ while in-custody

**Measure:**
- Hold at least three groups at the jail in all pods
- Clients are released from custody and have their supervision modified with successful completion of programs in jail

**Progress:** There are currently MRT™ groups in two pods at the jail and one CBT group in minimum security

---

**Goal:** Hire an analyst

**Objective:**
- Data collection
- Program evaluation
- Establish best practices for Nevada County

**Measure:**
- Complete data collection guidelines
- Determine if current programs being used are effective in recidivism or change of thinking
- Develop measures of success for the programs which are determined to be the most beneficial for clients and most cost effective

**Progress:** Analyst hired and contract with outside evaluator has been completed to begin evaluating programs with the analyst in January of 2016.

---

**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>California Highway Patrol</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>Truckee PD</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>Nevada City Police</td>
<td>$5,000</td>
<td>$15,000</td>
</tr>
<tr>
<td>Grass Valley Police</td>
<td>$15,000</td>
<td>$112,581</td>
</tr>
<tr>
<td>Sheriff Department</td>
<td>$551,139</td>
<td>$1,061,849</td>
</tr>
<tr>
<td>Health and Human Services</td>
<td>$132,699</td>
<td>$1,462,663</td>
</tr>
<tr>
<td>Treatment</td>
<td>$78,688</td>
<td>$551,139</td>
</tr>
<tr>
<td>Probation</td>
<td>$494,167</td>
<td>$551,139</td>
</tr>
</tbody>
</table>

$1,061,849 $1,462,663 $494,167 $551,139 $132,699 $112,581 $5,000 $78,688 $15,000
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

Community Recovery Resources
- inpatient treatment $31,200
- transitional housing $122,400
- outpatient treatment $46,000

GPS/Veritracks
- $5,000

FY 2015-16 $204,600  FY 2014-15 $5,000

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

Career Employment Services $5,000
Northern California Construction Training $170,000
211 Referral Services $10,000
Community Recover Resources & Common Goals transitional housing $34,000
Community Recovery Resource outpatient treatment $42,960
Community Recovery Resources inpatient treatment $62,564

FY 2015-16 - $175,000  FY 2014-15 - $149,524
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

In FY 2015-16 Dr. Shannon Carey and her organization will be helping the county evaluate the effectiveness of local programs and/or services.

Does the county consider evaluation results when funding programs and/or services?

The county intends to moving forward.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

We currently have a Mental Health Court, a DUI Court and Adult Drug Court. We immediately connect AB 109 clients with Health and Human Services Agency to connect with Medi-Cal, MediCare and General Assistance. We have two treatment programs in our county Common Goals, which offers both outpatient and transitional housing and Community Recovery Resources, which offers Inpatient, Outpatient, transitional and detox services, and has two locations in the local area, one in Nevada County, the other in Placer County which boarders the southern part of Nevada County. We have a 211 service which has all of the local and government-based resources which we make referrals to so our clients can find ways to meet their needs. We have a Behavioral Health Therapist on staff who services mostly AB 109 clients but is also seeing high needs clients as well. We have a Work Force Connection, One Stop, where our clients are directed to go until they maintain gainful employment. We also work to have our clients complete their GED or High School Diploma during their term of supervision. We are partnering with Adult Education to possibly offer classes at our Day Reporting Center if the need is there. If not we will continue to direct our clients to the existing Adult Education classes at their main campus. We are also partnering with the local library in some literary education and exposure to our clients as well. We also partner with a non-profit mentoring program called Project HEART, which provides pro-social connections and activities.

What challenges does your county face in meeting these programming and service needs?

We have a strong collaboration within the community with public agencies and private entities as well. Currently housing and employment are the biggest barriers for meeting our clients needs.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Remaining highly collaborative with all entities and thinking outside the box in terms of what may work. Educating our staff and community partners and the community at large about probation and what AB 109 has done to change the way we operate in probation has helped to gain support from areas we never thought possible.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Peer Mentorship has really assisted in helping clients make pro-social connections within the community. A lot of our AB 109 population is not native to the area and their only connections in the past have been anti-social. Having this program available to us allows probation officers to connect the clients to other pro-social people which in turn builds their self efficacy and gives them a positive purpose without relying on their probation officer for constant support.
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### Orange County

**Goals, Objectives, Outcome Measures and Progress**

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Implementation of a system that provides public safety and uses best practices in reducing recidivism</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>• Expand the Day Reporting Center (DRC) to include offenders under general probation supervision to benefit evidence-based intervention</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>• Collect data on average daily population (ADP)</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>On May 12, 2015, the Board of Supervisors approved the annual renewal of the current DRC contract with BI Inc. The contract was amended to include provision of re-entry services to the general supervision offender population. As a result, the ADP increased from 44 in May 2015 to 84 as of September 2015. The DRC processed a total of 1,009 referred offenders, 911 of whom exited the program, as of September 30, 2015. An updated report will be completed for the period through December 2015.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Implementation of a system that effectively uses alternatives to pre-trial and post-conviction where appropriate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>• Establish a pre-trial program that utilizes evidence-based practices</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>• Obtain grant</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>In 2015, the Judicial Council awarded a grant to Orange County to establish a pre-trial pilot program. A multi-agency team, led by the OC Superior Court, includes OC Probation, Health Care Agency, Sheriff Department, District Attorney and Public Defender’s Office. Implementation is scheduled for early 2016.</td>
</tr>
</tbody>
</table>
**Goal:** Implementation of a streamlined and efficient system in Orange County to manage our additional responsibilities under Realignment

**Objective:**
- Participate in pilot project with BSCC and Public Policy Institute of California (PPIC) designed to identify best practices among county corrections agencies

**Measure:**
- Data submitted to PPIC to determine the number of programs identified as best practices being used for the realigned offender population

**Progress:** Orange County is one of 12 counties participating in a Multi County study by the BSCC and the PPIC. The goals of this study are (a) compile recidivism statistics for the full realignment population and range of recidivism measures; (b) analyze relative effectiveness of different services, programming, sanctioning and other recidivism reduction strategies; and (c) assist counties with improvements in data collection and the use of date for continuous self-evaluation.

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*

**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Law Enforcement</td>
<td>$491,272</td>
<td>$677,793</td>
</tr>
<tr>
<td>Public Defender</td>
<td>$349,129</td>
<td>$338,897</td>
</tr>
<tr>
<td>District Attorney</td>
<td>$753,311</td>
<td>$1,138,897</td>
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<tr>
<td>Health Care Agency Post-Custody</td>
<td>$3,920,294</td>
<td>$6,100,138</td>
</tr>
<tr>
<td>Health Care Agency In-Custody</td>
<td>$7,957,977</td>
<td>$8,839,361</td>
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<tr>
<td>Sheriff</td>
<td>$36,291,875</td>
<td>$41,777,014</td>
</tr>
<tr>
<td>Probation</td>
<td>$13,650,815</td>
<td>$15,589,241</td>
</tr>
</tbody>
</table>

The FY 2015-16 allocation is based on Orange County's total allocation, as estimated by the State and distributed to the public agencies, according to prior year trends and public agency requests for funding. The total cash received for FY 2015-16 will not be finalized until after the close of the fiscal year.

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
The CCP did not allocate the funds to the specific services but did allocate to the departments who then chose to allocate a portion or all of their funds for programs and services.

*Probation

**Heath Care Agency
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

The CCP allocates funds to public agencies each year and it is at the public agency's discretion, in consultation with other participating public agencies, to provide programs and services with those funds. In FY 2014-15, public agencies contracted out with non-public agencies to provide some programming and services such as sober living, Day Reporting Center services, residential and outpatient treatment, electronic monitoring, drug testing and polygraph services.

Sober Living (Clean Path Recovery, Colette's Children's Home, Grandma's House of Hope, New Life Spirit, Straight Talk, Inc., Esther House) 


Social Model Detoxification (California Hispanic Commission on Alcohol and Drug Abuse, Inc., Unidos Recovery Home, Woodglen Recovery Junction, Inc., The Roque Center) 

Medical Detoxification (Behavioral Health Services, Inc, Redgate Memorial, Recovery Center, American Recovery Center) 

Methadone Detoxification & Maintenance (Western Pacific Med/Corp.) 

Medication Assisted Treatment (Phoenix House Orange County, Inc., Korean Community Services, Inc.)
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, Orange County Probation’s research team is conducting an evaluation of the Day Reporting Center (DRC). They are in the process of identifying a suitable comparison group, using propensity matching. They anticipate releasing a report in 2016. A multi-agency effort to develop a Program Efficacy Study is also underway.

Does the county consider evaluation results when funding programs and/or services?

Yes, the County identifies programs that have been proven effective in reducing recidivism. Orange County Probation is currently evaluating Thinking for a Change (T4C) and current Request for Proposals require data collection of outcome measures.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of service are now available?

Health Care Agency Treatment Assessment and Admissions (November 2011 - September 2015)

<table>
<thead>
<tr>
<th>Referred to BHS Treatment</th>
<th>Total</th>
<th>Admitted to BHS Treatment</th>
<th>Total</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient SUD Tx</td>
<td>2,275</td>
<td>Outpatient SUD Tx</td>
<td>1,742</td>
<td>77</td>
</tr>
<tr>
<td>Residential SUD Tx</td>
<td>1,857</td>
<td>Residential SUD Tx</td>
<td>1,655</td>
<td>89</td>
</tr>
<tr>
<td>Outpatient AMHS</td>
<td>402</td>
<td>Outpatient AMHS</td>
<td>243</td>
<td>60</td>
</tr>
<tr>
<td>Sober Living</td>
<td>383</td>
<td>Sober Living</td>
<td>368</td>
<td>96</td>
</tr>
<tr>
<td>Social Model Detox</td>
<td>431*</td>
<td>Social Model Detox</td>
<td>332</td>
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<tr>
<td>Medical Detox</td>
<td>61*</td>
<td>Medical Detox</td>
<td>36</td>
<td>59</td>
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<tr>
<td>Full Service Partnership (FSP)</td>
<td>50*</td>
<td>Full Service Partnership (FSP)</td>
<td>36</td>
<td>72</td>
</tr>
<tr>
<td>Shelter</td>
<td>59*</td>
<td>Shelter</td>
<td>39</td>
<td>66</td>
</tr>
<tr>
<td>Methadone Detox</td>
<td>53*</td>
<td>Methadone Detox</td>
<td>48</td>
<td>91</td>
</tr>
<tr>
<td>Methadone Maintenance</td>
<td>46*</td>
<td>Methadone Maintenance</td>
<td>30</td>
<td>65</td>
</tr>
<tr>
<td>Clients seen by Psychiatrist</td>
<td>328*</td>
<td>Clients seen by Psychiatrist</td>
<td>280</td>
<td>85</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>5,945</strong></td>
<td><strong>Grand Total</strong></td>
<td><strong>4,809</strong></td>
<td><strong>81</strong></td>
</tr>
</tbody>
</table>

*Estimated, not tracked from the beginning
What challenges does your county face in meeting these programming and service needs?

This past year there were two Orange County Grand Jury Reports on AB 109 and both reports identified the need for additional residential treatment beds. Available funding was the issue when the reports were written. Since then, additional funds were identified and offenders requiring residential treatment were able to have continual access to this service. As recovery is a process, most offenders who enter treatment are not ready for the commitment required to live a sober lifestyle and thus are not successful in abstaining from drugs. When this service was initially implemented, many offenders had multiple attempts at residential treatment and thus the demand for this service was high. With limited funds and beds available, a policy on enrollment into residential treatment was formulated. This new policy allowed offenders who have never received residential services be given higher priority. Offenders with multiple previous attempts were put on the county’s non-AB 109 waitlist for an available county-funded bed. This increased the availability of residential treatment services to prospective participants, especially offenders new to residential treatment. Usual wait time for residential treatment funded through AB 109 was only a couple of days. Going through the county’s wait list process could be anywhere from a week to a month.

What programmatic changes and/or course corrections have you made in the implementation of Public safety Realignment that you believe other counties would find helpful?

Recent review of Orange County Probation’s Realignment funding and supervision strategies led the Department to identify resources and opportunities that were previously unavailable. In the past, Post-Release Community Supervision (PRCS) and Mandatory Supervision (MS) populations were supervised in separate divisions. To increase the overall efficiency and consistency among the PRCS and MS populations, they were combined into one Division - AB 109 Field Supervision Division. At the beginning of realignment in 2011, this was not feasible, due to various internal and external barriers and obstacles. This change took place on September 2015.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Health Care Agency (HCA) and OC Probation received the 2015 National Association of Counties (NACo) award for “Providing Effective Behavioral Health Treatment and Resources in a Probation Setting” in the Criminal Justice/Public Safety and Health Category along with the 2015 California State Association of Counties (CSAC) Merit Award for the “Removal of Treatment Barriers for Offenders.”

At intake, AB 109 clients had lower motivation than clients seeking substance abuse treatment nationwide, and slightly higher (or comparable) motivation that the average client entering substance treatment in Orange County. After receiving treatment, AB 109 clients had higher motivation and readiness for change scores, compared to Orange County clients in general, and higher than clients nationwide. AB 109 clients also showed better engagement, peer support in the program and social support outside of treatment after receiving services than clients nationwide.

Surveys and tools used during the evaluation are:

- Participant Information Form – Demographic and contact information
- MacArthur Community Violence Instrument – Examines instances of harm to others and victimization
- Modified Self-Harm Inventory – A modified version of original 22-item self-help inventory, helps to examine how frequently clients participate in self-harm behaviors
- Modified Colorado Symptom Inventory – Examines psychiatric symptomatology
- California Outcome Measurement System (CalOMS) – Collects client demographic information, along with outcome data (e.g., substance use frequency, criminal involvement, hospitalizations, homelessness, employment and education, family and social functioning, etc.)
- CESI & CEST – Administered in substance abuse treatment, these tools assess clients’ motivation for treatment, engagement in treatment, counseling rapport, peer and social support

**Client Satisfaction Survey of Substance Use Disorder (SUD) Services**

SUD’s client feedback regarding services collected by Health Care Agency staff via client satisfaction surveys administered. December 2014 and June 2015 to participating county-funded clients. Overall satisfaction was 92% being satisfied or very satisfied.

**Adult Mental Health Services Outcomes**

From October 1, 2014 through September 30, 2015, the mental health clinic served 135 clients. During this period, 11 clients gained employment and worked a total of 1,631 days, and 3 clients enrolled in school. There was an 83% decrease in psychiatric hospitalizations, and a 57% decrease in homelessness.
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# Placer County

## Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

**Goal:** Reduce caseloads to recommended ratio of 50:1

**Objective:**
- 100% of in-county offenders will have a completed Correctional Assessment and Intervention System™ (CAIS™) assessment
  - Increased contacts for high/moderate risk; fewer for low-risk offenders
  - 100% of in-county offenders will have a working case plan

**Measure:**
- % of in-county offenders with a completed CAIS™ risk/needs assessment
  - Number of contacts for high/moderate offenders
  - % of in-county offenders with a case plan

**Progress:** Currently, 100% of high/moderate offenders have a case plan

**Goal:** Hire and train staff to maintain jail population

**Objective:**
- 100% of funded and unfunded positions will be filled
  - 7 Admin Legal Clerk positions funded
  - Open more of South Placer Correctional Facility

**Measure:**
- Number of Correctional Officer positions filled (14)
  - Number of Admin Legal Clerk positions filled (7)
  - Net jail beds gained through opening of new jail (88)

**Progress:** There has been an increase of in-custody programming, facilitated by a correctional officer assigned to a program position

**Goal:** Meet offender needs through evidence-based practices

**Objective:**
- Obtain offender referrals from Probation
  - Conduct risk/need assessments prior to treatment
  - Provide appropriate treatment to offenders

**Measure:**
- Number of referrals from Probation
  - Number of assessments conducted
  - Number of offenders in treatment

**Progress:** Over 435 Probation referrals; over 375 assessments conducted; over 690 offenders in treatment based on assessment results

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- **PLEA Collaborative**: $400,000 (FY 2014-15), $300,000 (FY 2015-16)
- **Public Defender**: $108,292
- **District Attorney**: $298,512 (FY 2014-15), $296,044 (FY 2015-16)
- **Sheriff**: $3,705,518 (FY 2014-15), $3,674,885 (FY 2015-16)
- **Health and Human Services**: $1,269,916 (FY 2014-15), $1,259,418 (FY 2015-16)
- **Probation**: $1,707,403 (FY 2014-15), $1,693,288 (FY 2015-16)

FY 2014-15 and 15-16 Allocations to Public Agencies for Programs & Services

- **Out-client Mental Health (Provided by County Staff)**: $77,500 (FY 2015-16), $77,500 (FY 2014-15)
- **Practitioners**: $340,910 (FY 2015-16), $340,910 (FY 2014-15)
- **In-custody Mandated Programs Provided by CBOs)**: $25,000 (FY 2015-16), $90,873 (FY 2014-15)
- **Drug Court (Treatment Provided by CBOs)**: $74,000 (FY 2015-16), $74,000 (FY 2014-15)

FY 2014-15 and 2015-16 contracts are written to allow use in the level of care needed with some flexibility. The above figures are projections of how funds are expected to be utilized.
Community Recovery Resources includes residential, detox, out-client, transitional housing and in-custody programs. Progress House includes residential, transitional housing, out-client. Pacific Education Service includes out-client and in-custody programs. Sierra Mental Wellness Group includes educational programming and out-client. Recovery Now includes transitional housing. Roseville Home Start includes transitional housing. Turning Point includes intensive out-client mental health and Sierra Native Alliance included out-client services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the county has taken steps to collaborate between departments to ensure data is collected accurately and efficiently. Recently, Probation and Health and Human Services (HHS) have begun an analysis of the Drug Court Program. Additionally, Probation has recently reached out to work with community-based treatment providers to develop a reporting system in order to keep Probation up to date with the status of offenders in-treatment for efficiency in decision-making and offender support.

Does the county consider evaluation results when funding programs and/or services?

Placer County is currently in the process of implementing priority-based budgeting and will soon begin funding county programs based on outcomes.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

20% or less. Of the total proposed allocation ($7,381,350), approximately $1,142,935 is allocated to evidence-based programs and services (15%).

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Community-Based Organizations: detox, residential, outpatient (in- and out-of-custody), educational programming, transitional housing combined with outpatient, outpatient mental health and intensive mental health care
- County Staff: Screening, assessment, linkages to substance use services, mental health, primary care treatment and case management

What challenges does your county face in meeting these programming and service needs?

At this time our need outweighs resources. Coordinating care across multiple providers and disciplines is also difficult.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Training case managers in both mental health and substance use practices to better meet needs of co-occurring and high-utilizing clients.
- Co-located HHS and Probation staff, and co-located HHS and courts staff who help bridge county systems.
- Good utilization of multiple levels of care for clients including education at the Placer Re-Entry Program (PREP) Center, treatment and intensive case management to increase engagement in treatment modalities, etc..
Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The use of a validated risk/need assessment as a local best-practice has shown positive results. More offenders are supervised on appropriate caseloads, resulting in higher-quality contacts with officers. Smaller caseload sizes has provided officers the opportunity to set goals with offenders and support these goals while keeping the community safe.
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### Plumas County

#### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Enhanced alternative sentencing option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>• Increase participation at the Day Reporting Center</td>
</tr>
<tr>
<td>Measure:</td>
<td>• Number of clients served at the Day Reporting Center</td>
</tr>
</tbody>
</table>

#### Goals, Objectives, Outcome Measures and Progress

**FY 2015-16**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Enhance alternative sentencing option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>• Increase participants at Day Reporting Center</td>
</tr>
<tr>
<td>Measure:</td>
<td>• Calculate total participants served for FY 2015-16</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Enhance intensive community supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>• Increase staffing to provide this service</td>
</tr>
<tr>
<td>Measure:</td>
<td>• Calculate total of probationer field contacts conducted in FY 2015-16</td>
</tr>
</tbody>
</table>

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The CCP meets monthly
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literacy Program</td>
<td>$33,620</td>
<td>$30,000</td>
</tr>
<tr>
<td>District Attorney/Alternative Sentencing</td>
<td>$169,500</td>
<td>$130,000</td>
</tr>
<tr>
<td>Sheriff's Office</td>
<td>$361,594</td>
<td>$361,594</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$201,845</td>
<td>$201,845</td>
</tr>
</tbody>
</table>

FY 2014-15 and 2015-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literacy Program</td>
<td>$33,620</td>
<td>$30,000</td>
</tr>
<tr>
<td>Day Reporting Center (Treatment/ Counseling)</td>
<td>$169,500</td>
<td>$130,000</td>
</tr>
<tr>
<td>In-Custody Services</td>
<td>$216,535</td>
<td>$186,692</td>
</tr>
<tr>
<td>Intensive Community Supervision</td>
<td>$369,024</td>
<td>$376,747</td>
</tr>
</tbody>
</table>

FY 2014-15 and 2015-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15, $15,000 was allocated to Alliance for Workforce Development.
- In FY 2015-16, $25,000 was allocated to Alliance for Workforce Development.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, Plumas County has recently (FY 2015-16) created a quarterly expenditure report form that must be submitted for evaluation at end of each fiscal quarter to justify use of funds and define services provided.

Does the county consider evaluation results when funding programs and/or services?

Yes, the quarterly expenditure report form is used for evaluation purposes.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for average daily population and Length of Stay.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)? 21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Mental Health - intensive outpatient services
- Substance Abuse Treatment - intensive outpatient services
- Domestic Violence/Batterer's Programming - intensive outpatient services
- Mental Reconation Therapy™ - intensive outpatient services
- Cognitive Behavior Therapy - intensive outpatient services

What challenges does your county face in meeting these programming and service needs?

Inpatient services for all programming is not available due to the rural location and financial burdens.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Newly implemented Parenting Training Program.
## Riverside County

### Goals, Objectives, Outcome Measures and Progress

#### FY 2014-15

**Goal:** Improve law enforcement coordination

**Objective:**
- Create an electronic file for data sharing to improve statistical reporting
- Implement SMART Justice to reduce amount of time staff spend searching for information
- Improve accuracy of data provided to local law enforcement agencies

**Measure:**
- Number of automatic data transfers to other agencies
- Number of calls received from local law enforcement agencies for information
- Number of contacts from outside agencies requesting data modifications

**Progress:** During FY 2014-15, the Probation Department provided access to offender information to 19 law enforcement agencies through the Law Enforcement Portal. To facilitate its use, the Probation Department conducted training sessions for any law enforcement agency requesting usage. The number of monthly logins by participating agencies increased from 630 in 2014 to 752 in 2015, for an increase of 19%. Additionally, on a monthly basis, the Probation Department provides such data as active warrant lists to local law enforcement agencies. During FY 2014-15, the Riverside Sheriff and Probation Departments worked with the Department of Justice (DOJ) to begin the implementation of SMART Justice, a statewide data sharing platform which will provide public safety agencies across the state with a one-stop, user-friendly, web portal to access information about offenders. As of this writing, the Sheriff’s Department and the Probation Department are continuing to work with DOJ to begin the implementation. This will continue as a goal for next FY. In preparation for SMART Justice, the Probation Department worked with the DOJ to automate the California Law Enforcement Telecommunications System’s (CLETS) Supervised Release File (SRF). Law enforcement agencies are able to acquire information regarding subjects’ probation or parole status via a CLETS request. Traditionally, the Probation Department had to manually enter probationers’ supervision status into CLETS. This was extraordinarily labor intensive. Automating the process dramatically reduced the time needed to process case files and enhanced staff productivity. Two outcome measures for FY 2014-15 were to track the number of calls received from local law enforcement agencies for information and the number of contacts from outside agencies requesting data modifications. Statistical data was not available at the time of this survey.
**Goal:** Improve assessment and pre-release operation

**Objective:**
- 40% increase in the number of pre-trial reports recommending release by use of the Proxy Triage Screener through the Sheriff
- Implement the use of alternative sanctions such as electronic monitoring for pre-trial defendants
- Increase collaboration with the California Department of Corrections and Rehabilitation (CDCR) to improve release practices for offenders with mental health, health and housing needs

**Measure:**
- Number of pre-trial reports completed and number of reports with recommendations for release
- Number of pre-trial defendants placed on electronic monitoring
- Number of offenders released from the custody of CDCR that are transported by Probation for immediate services

**Progress:**
During FY 2014-15, the Sheriff's Department implemented the Proxy Triage Screener tool. Due to the volume of bookings into county jails, this tool was intended to assist in identifying defendants for potential Own Recognizance (OR) release. Probation pre-trial officers triaged booking sheets using the Proxy scores and interviewed identified defendants. Release recommendations were made, as appropriate, focusing on the totality of the case, the use of the Virginia Pre-Trial Risk Assessment Instrument (VPRAI), and the threat to community safety. To compare available data, the months of January to June 2014 were compared with January to June 2015. Between January and June 2014, there were 640 recommendations for release. Between January and June 2015, there were 264 recommendations for release, which is a decrease of 58%. Although our goal was to increase the number of release recommendations by 40%, the implementation of Proposition 47 resulted in a substantial decrease in qualified bookings. As such, this goal was not met. For those not recommended or granted OR release, the Sheriff identified 19 defendants suitable for release on electronic monitoring pending future court hearings. Riverside University Health System, Behavioral Health (RUHS-BH) coordinated with CDCR for the release of offenders with serious mental health issues with the assistance of Probation. During the FY 2014-15, the process of transporting offenders from CDCR was further refined. The protocol begins with contact between CDCR medical staff and the RUHS-BH AB 109 supervisor. Appropriate documentation is sent and reviewed by RUHS-BH and a plan of action is developed. Probation is contacted to assist with transportation from Southern California prisons to ensure the offender is safely delivered to a probation field office for intake and assessment. Once the offender's needs have been determined, appropriate services, which may include food, clothing and housing, are immediately delivered. This goal was not met during FY 2014-15, although a process has been implemented by RUHS-BH to track offenders provided these services in FY 2015-16.
**Goal:** Increase in-custody, re-entry and provisions of treatment services

**Objective:**
- Implement the Transition and Re-entry Unit (TRU)
- 50% increase to mental health and substance abuse services provided to realigned offenders
- Numbers of Day Reporting Centers (DRC) available

**Measure:**
- Number of offenders provided re-entry services through TRU
- Number of mental health and substance abuse service provided

**Progress:** On May 11, 2015, Probation opened the Temecula DRC in collaboration with RUHS-BH, Riverside County Office of Education, Workforce Development, Department of Public Social services, RUHS-Public Health, Veterans Services and Child Support services to support the realignment population in that region. Services and programs provided include: substance abuse, anger management, positive parenting, physical and mental health, general relief, Medi-Cal outreach and assistance, general education, job readiness, peer support and Cognitive Behavior Counseling. The Temecula DRC serves the southwest region of the county, with all partners working towards the goal of reducing recidivism by providing resources at a “one stop shop.” RUHS-BH also provides mental health assessments and treatment onsite. Additionally, offenders can be referred to a psychiatrist for medication evaluation at the RUHS-BH clinics. The Riverside DRC, which has been fully operational since October 15, 2012, provides the same services, along with Sheriff’s Department re-entry services, through SITE-B, Riverside Superior Court Self-Help workshops, Riverside Community College outreach and tattoo removal assistance. Although the goal of increasing the number of DRCs by 200% during this fiscal year was not achieved, Probation did increase the number of DRCs by 100% and is scheduled to open a third DRC in the desert region of the county during FY 2015-16. During FY 2014-15, the Probation Department met the goal of implementing the TRU in June 2015 at the Larry D. Smith Correctional Facility and assigning two TRU Probation Officers to this program. The TRU program involves an evidence-based process to successfully transition offenders from jail to the community. It is implemented in three phases: in-custody phase, release phase and the community phase. The in-custody phase involves case planning with each offender. Developing a definite, but flexible, plan of action to be followed upon release is critical to develop stability when out-of-custody. The release phase involves confirming that the stability needs (food, medical, housing, clothing, transportation, etc.) of each offender is in place, completion of any in-custody case plan goals and adjusting the case plan as necessary to prepare for release. The community phase involves a handoff from the in-custody probation officer to the assigned supervision probation officer. The offender is transported to the probation office and his/her residence. The assigned supervision officer assists the offender with meeting his/her goals while out-of-custody. As the program was established in the final month of FY 2014-15, no data is available. During FY 2014-15, RUHS-BH provided mental health and substance abuse services to realignment offenders as follows: 3,438 in the detention setting, 1,183 in behavioral health outpatient clinics, and 825 were provided substance abuse services, for a total of 5,446 offenders served. This is an increase of 7.5% from last FY, when RUHS-BH served 5,067 offenders.
### Goals, Objectives, Outcome Measures and Progress FY 2015-16

<table>
<thead>
<tr>
<th>Goal: Improve assessments and pre-release operations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Implement behavioral health program in county jails to address continuity of care for inmates being released from safety cells and those evaluated as no longer requiring an acute level of care</td>
</tr>
<tr>
<td>• Increase collaboration between Probation and RUHS-BH to improve offender engagement with inmates in state prison who are unable to navigate public transportation</td>
</tr>
<tr>
<td>• Sheriff will utilize the PROXY Triage Assessment to identify which inmates are referred for programs</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• RUHS-BH will staff two Step-Down Units at the Larry D. Smith Correctional Facility to provide services to inmates directly related to upcoming releases (i.e. housing, outpatient mental health services, residential treatment and substance use outpatient services)</td>
</tr>
<tr>
<td>• Successfully transport or arrange for transportation for 25% of offenders unable to navigate public transportation from Southern California prisons</td>
</tr>
<tr>
<td>• Increase the number of inmates in custodial programs</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Improve in-custody, re-entry and provision of treatment services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Add a third DRC to the desert region of the county</td>
</tr>
<tr>
<td>• Engage offenders in-custody through the TRU program to reduce failures to appear upon release</td>
</tr>
<tr>
<td>• RUHS-BH will increase services to realignment offenders</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• The number of DRCs available to offenders</td>
</tr>
<tr>
<td>• Reduce technical violations for failing to report by 25% for the mandatory supervision (MS) population</td>
</tr>
<tr>
<td>• RUHS-BH will add services for realignment offenders to the Banning and Indio probation offices</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Improve law enforcement coordination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Implement SMART Justice</td>
</tr>
<tr>
<td>• Increase staffing levels for Probation, Sheriff and District Attorney's (DA) Office</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• Develop workgroup responsible for identifying SMART Justice goals and objectives</td>
</tr>
<tr>
<td>• Probation will fill 50% of remaining 37 vacant AB 109 positions; Sheriff will staff 10 positions for Behavioral Health Core Teams; DA will expand Division of Victim Services by three advocates</td>
</tr>
</tbody>
</table>
### FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>RUHS-BH</td>
<td>$12,735,136</td>
<td></td>
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<tr>
<td>Other - Contingency</td>
<td>$4,112,814</td>
<td></td>
</tr>
<tr>
<td>Police Departments</td>
<td>$2,324,162</td>
<td>$1,207,380</td>
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<tr>
<td>Health &amp; Human Services</td>
<td>$10,287,669</td>
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<tr>
<td>Public Defender</td>
<td>$791,318</td>
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<td>District Attorney</td>
<td>$1,815,104</td>
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<td>Sheriff Department</td>
<td>$30,882,702</td>
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</tr>
<tr>
<td>Probation Department</td>
<td>$1,207,380</td>
<td>$12,187,842</td>
</tr>
</tbody>
</table>

FY 2015-16 Allocation: total includes growth allocation of $4,188,643.

### FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services.
FY 2014-15: Probation (supervision services $8,719,544, DRC $2,141,961, Special Program Services including bus passes, tattoo removal, Secure Continuous Remote Alcohol Monitoring or SCRAM, evidence-based programming, cognitive behavior classes, electronic monitoring, documentation fee assistance $1,326,338) Sheriff (in-service custody $15,025,121, facility operational costs $4,082,913, transportation costs $326,633, Programs & Jail Alternative Programs $734,924, Contract Beds $3,674,622) Health & Human Services (intensive treatment $4,264,293, detention services $2,351,824, contracted placement services $263,872, expanded clinic services $3,407,680) District Attorney (Funded with a combination of growth and contingency funds—violations of PRCS and parole, other Realignment prosecution activities) Public Defender (parole hearing $257,072, Deputy Public Defender AB 109 services $324,293, legal support assistance $74,742, paralegal services $135,211) Police Departments (Probation assistant/monitoring services, Beaumont $158,480, Cathedral City $191,154, Corona $158,480, Desert Hot Springs $158,480, Hemet $191,154, Palm Springs $158,480, Riverside $191,154) Other (contingency funds estimated lower allocation received in FY 14-15 $4,362,206).

FY 2015-16: Probation (supervision services $15,420,893, DRC $1,989,691, special program services including bus passes, tattoo removal, Secure Continuous Remote Alcohol Monitoring or SCRAM, evidence-based programming, cognitive behavior classes, electronic monitoring and documentation fee assistance $540,996) Sheriff (in-service custody $16,896,311, mental health HU overtime cost $844,816, facility operational costs $6,383,051, transportation costs $563,210, programs operational cost $1,220,289, contract beds $4,224,078, one-time projects $750,947) Health & Human Services (intensive treatment $787,414, detention services $2,575,354, contracted placement services $1,095,651, expanded clinic services $3,660,211, Riverside County Regional Medical Center $3,141,742, detention health $1,474,764) District Attorney (Deputy District Attorney III AB 109 services $372,673, Senior District Attorney Investigator $758,664, legal support assistance $316,618, Victims Services Advocate $367,149) Public Defender (Deputy Public Defender AB 109 services $737,769, legal support assistance $239,282, paralegal services $410,814) Police Departments (probation assistant/monitoring services, Beaumont $241,634, Cathedral City $291,452, Corona $241,634, Desert Hot Springs $241,634, Hemet $291,452, Palm Springs $241,634, Riverside $291,452, San Jacinto $241,634, Coachella $241,634).
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the Probation Department’s evaluation of programs and services is primarily done through a system of regular statistical reports or audits consisting of relevant data elements focusing on program participation and defined program goals. Additionally, several programs and services utilize pre- and post-tests to evaluate participant satisfaction and progress.

Does the county consider evaluation results when funding programs and/or services?

Yes, the Probation Department incorporates a variety of programs and services in its overall supervision strategy involving the realignment population. All programs and services including bus passes, clothing, food, hygiene, housing, incentive funds, Cognitive Behavioral Treatment and Day Reporting Centers (DRCs) are allocated to several division budgets whereby a manager is responsible for oversight and ongoing approval. All services involve regular reporting of defined data elements with month-to-month and year-to-year comparisons. Any potential increases or decreases to a program or service budget includes an assessment of program efficiency and effectiveness. The CCP Executive Committee (CCPEC) reviews the requests for budget allocations during budget development yearly. Each agency is asked to present a description of their programs, their respective costs and relevant statistics, which are reviewed by the CCPEC for efficacy.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism and average daily population.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%. Following evidence-based programming in our field offices, DRCs and in the Transition and Re-Entry Unit (TRU). 1. Motivational Interviewing 2. Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Assessments 3. Collaborative Case Planning 4. Courage to Change Journaling System 5. incentives and positive reinforcement. The Riverside Sheriff's Department has also implemented evidence-based programming in their Guidance Opportunities to Achieve Lifelong Success (GOALS) and Veterans Programs.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The type and treatment services provided by the Probation Department and collaborative partners vary in degree based on custody status and risk assessment levels. Many out-of-custody programs and services are available at two regionally located DRCs offering assistance with the following needs: substance abuse, anger management, positive parenting, physical and mental health, general relief, Medi-Cal outreach, general education, job readiness, peer support and Cognitive Behavioral Counseling.

The partnership led by Riverside University Health System-Behavioral Health (RUHS-BH) operates four clinics throughout the county specializing in the treatment of Public Safety Realignment offenders. Medication and outpatient services are provided in each of the clinic locations by psychiatrists. In addition, one Forensic Full Service Partnership (FFSP) clinic is operational in...
Riverside. FFSP offers intensive wellness and recovery-based services, specializing in clients with serious mental health diagnoses in order to help break the cycle of homelessness, psychiatric hospitalization and incarceration related to their mental health. Additionally, RUHS-BH began providing mental health services to offenders at the Perris and San Jacinto probation offices. Similar services are provided in custody by mental health staff assigned to detention services.

The Probation Department implemented a TRU program to successfully transition offenders from jail to the community. The services provided include: risk and need assessments, case planning, addressing stability needs (food, medical, housing, clothing, transportation, etc.), Cognitive Behavior Treatment and assistance with accessing other custodial services and programs. The program incorporates a handoff to a field supervision deputy to improve engagement and assistance with transportation upon release.

Additionally, the Probation Department continues to offer and improve upon emergency and transitional housing services. The preference is to collaborate with housing providers who can assist with transitional services which promote self-sufficiency, life skill set building, alcohol and substance abuse education, and employment-related services. Ongoing efforts include partnerships with law enforcement agencies, Code Enforcement, Waste Management, Mental Health, and the Department of Public Social Services (DPSS) Homeless Outreach Team to engage at risk populations.

The Sheriff's Department offers in-custody programming for sentenced inmates via the Veterans Enrichment and Training (VETs) and GOALS programs. The VETs program utilizes intensive evidence-based therapeutic models which address the specific criminogenic and re-entry needs of the Veteran population. It includes concepts such as group counseling, Cognitive Behavioral Treatment, motivational interviewing techniques and interactive journaling.

The GOALS program aims to reduce the risk to recidivate by addressing the seven criminogenic factors through a highly structured program that incorporates cognitive and social learning theories. The program will focus on dynamic risk factors and criminogenic needs and then to facilitate a greater likelihood for long term success, counselors will work hand-in-hand with the program participant and community partnerships to develop a detailed transition plan and facilitate a more seamless re-entry into the community.

What challenges does your county face in meeting these programming and service needs?

- Jail overcrowding continues to be a major challenge, as well as ongoing development of in- and out-of-custody programming. The challenge of pursuing alternative custodial sanction options and innovative evidence-based programs will require established partnerships to grow and will be relied upon during the next fiscal year.

- Another challenge is the development of data sharing abilities and systemic adjustments to the referral, enrollment and program completion process of any community-based organization provided service. Data sharing will allow for improved accuracy of data tracking and assessment of program effectiveness and outcome measurement.

- A third challenge is the collection and analysis of data for the existing programs. Ensuring the timely and accurate collection of data, maintaining and upgrading necessary hardware and software systems and frequent collaboration between departments is critical to program fidelity. To that end, a data sharing committee, made up of Probation, the Superior Court, District Attorney's Office and Sheriff's Office, Riverside County Information Technology Department was formed.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In Riverside County, the CCP has provided a forum for county entities to work collaboratively. Prior to realignment, the various county departments interacted regularly, but rarely collaborated on a large scale. After realignment, the departments were required to work together. This mandated a change in each department's philosophy on a large scale and was critical to the implementation of realignment in Riverside County. Had the relationships become adversarial, implementation of realignment could have resulted in disaster. While there were challenges during the initial roll out of realignment, over the course of the past four years, relationships have been developed between departments that shed light on each department's strengths and challenges. This has been particularly evident during the established sub-work groups that meet to carry out the CCPEC's objectives.

Through time and experience, each entity began to recognize how each criminal justice partner fits together in the larger scheme. This allows a synergistic response to tackling important obstacles to implementing realignment.

Specific programmatic changes include the development and implementation of the DRC program, Probation's acquisition of pre-trial operations from the Superior Court, the development of Alternatives to Custody program by the Sheriff, the implementation of Probation's TRU, the implementation of Probation's Law Enforcement Portal, the creation of the Post-Release Accountability and Compliance Teams, and the formation of the Data Sharing Committee.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Probation Department and its collaborative opened a second DRC to service the southwest region of the county. The Temecula DRC collaborates with RUHS-BH, Riverside County Office of Education, Workforce Development, DPSS, RUHS-Public Health, Veterans Services and Child Support Services to support the realignment population. Services and programs provided include: substance abuse, anger management, positive parenting, physical and mental health, general relief, Medi-Cal outreach and assistance, general education, job readiness, peer support and cognitive behavior counseling. The DRCs work towards the goal of reducing recidivism by providing resources at a “one stop shop.” The Riverside DRC, has been fully operational since October 15, 2012, providing the above noted services to over 2,300 offenders to date and assisting 14 students obtain their GED or High School Diploma. Additionally the DRC provides Sheriff's Department re-entry services, Riverside Superior Court Self-Help workshops, Riverside Community College outreach and tattoo removal assistance.

During FY 2014-15, the Probation Department implemented the TRU at the Larry D. Smith Correctional Facility. The TRU program involves an evidence-based process to successfully transition offenders from jail to the community. It is implemented in three different phases: in-custody phase, release phase and the community phase. The in-custody phase involves case planning with each offender. Developing a definite, but flexible plan of action to be followed upon release is critical to develop stability when out-of-custody. The release phase involves confirming that the stability needs (food, medical, housing, clothing, transportation, etc.) of each offender is in place, completion of any in-custody case plan goals, and adjusting the case plan as necessary to prepare for release. The community phase involves a hand-off from the in-custody probation officer to the assigned supervision probation officer thereby ensuring immediate reporting upon release. The assigned supervision officer assists the offender with meeting his/her goals while out-of-custody. Since the program started in June 2015, no current data is available.
The Riverside Sheriff's Department furthered their evidence-based programming by implementing the GOALS program. It was expanded to the Southwest Detention Center on November 17, 2014, and to the Robert Presley Detention Center on June 1, 2015. In FY 2015-16, the Residential Substance Abuse Treatment (RSAT) program will merge with the GOALS program, expanding substance abuse programming to the AB 109 Realignment inmate population. Participation in the substance abuse and alcohol dependency module is determined through a series of assessments. The program, under the GOALS title, will continue to focus on therapeutic needs, basic and vocational education and re-entry services. During FY 2014-15, 258 inmates entered the GOALS program and 114 of them were awarded certificates.

Additionally, Riverside Sheriff’s Office started the VET pilot program at the Larry D. Smith Correctional Facility on October 20, 2014. The VET program utilizes intensive evidence-based therapeutic models which address the specific criminogenic and re-entry needs of the Veteran population. It includes concepts such as group counseling, cognitive behavioral treatment, motivational interviewing techniques and interactive journaling. During FY 2014-15, 26 inmates enrolled in the VET program and 19 completed the program.
The CCP did not provide goals for FY 2014-15 or 2015-16

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- County Executive's Office: $250,000
- Dept. of Human Assistance: $415,494
- District Attorney: $567,896
- Probation Department: $15,345,206
- Sheriff Department: $23,930,541

**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

- High Risk Drug Offenders* $1,372,615
- Domestic Violence Unit* $1,064,401
- Sex Offender Unit* $1,292,814
- Consulting Services-System Assessment $250,000
  - $100,000
- AB 109 Prosecution $507,896
  - $500,317
- Intensive Field Supervision Units $5,400,566
  - $5,962,525
- Transitional Housing with Volunteer of America $415,494
- ADRC Intake & Operations*** $6,214,810
  - $5,283,439
- Correctional Health Services** $4,446,501
  - $3,850,831
- Jail Release/Pre-Trial Supervision $623,833
  - $540,272
- PRCS Lab Testing* $60,000
  - $60,000
- Inmate Housing & Services $19,912,446
  - $17,245,223
- Home Detention/Electronic Monitoring $2,649,048
  - $2,294,215

*Post-Release Community Supervision; **Jail Mental Health; ***Adult Day Reporting Center

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

- No direct allocations were made to non-public agencies.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the county is utilizing AB 109 funding for consulting services that include a review and assessment of the local adult correctional system to provide long-range strategies to meet adult correctional needs. This study includes an evaluation of programs funded with Public Safety Realignment allocations.

Does the county consider evaluation results when funding programs and/or services?

Yes, when evaluation results are available, they are considered when program and service funding decisions are made.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. County agencies operating programs with Public Safety Realignment funds work to ensure at least some components of the program, such as risk and needs assessments and treatment services, are evidence-based.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The Sheriff’s Department, Health and Human Services, Probation and service providers are working collaboratively to provide a seamless continuum of services and supervision from jail to Probation for realigned offenders who are released from the Rio Cosumnes Correctional Center (RCCC) to complete a term of mandatory supervision with Probation. Eligibility Specialists help inmates enroll in healthcare and social service programs. Service needs are identified and services are provided, started and/or linked to inmates pre-release for a smooth transition back into the community where Probation ensures services are continued or started. Offenders at RCCC who are enrolled into this and other specialized programs are given a Re-entry Specialist who is selected for their job based on their training and expertise of the various community programs available to the participants after release. Prior to leaving the jail, the Re-entry Specialist talks to the participants about where their service needs are being offered in the community and assists with enrolling the offenders who want to continue with services into the programs that are available. The Re-entry Specialist utilizes bi-weekly multidisciplinary team meetings to collaborate for any particular service needs or programs they are having trouble finding in the community. Probation operates three Adult Day Report Center (ADRC) programs providing specialized supervision, treatment and support services such as vocational and educational services based on needs identified through Level of Service/Case Management Inventory™ (LS/CMI) risk and needs assessments and other assessments. The ADRC programs are available to both realigned offender and traditional Probation populations. Currently, over 700 offenders are participating in all three ADRC programs. One of the ADRC programs is in the process of relocating to a larger regionally strategic site to expand capacity and add specialized culturally sensitive services for transitional age 18-21
population targeted as part of the local Reducing African American Child Deaths Initiative. This expansion will add case management staff and create new opportunities for assessment and screening by eligibility specialists, nurses and mental health counselors for linkage to mental health, substance abuse and other services needed. Additionally, Sacramento County operates eight collaborative court programs that utilize multidisciplinary teams to provide specialized treatment services to address mental health and substance use disorders, behavioral health issues and exposure to trauma.

**What challenges does your county face in meeting these programming and service needs?**

Our county faces challenges related to resources needed to ensure programs and services are assessed and sustained at optimal levels of efficiency and effectiveness.

**What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?**

None to report at this time.

**Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.**

As previously described, a local best practice/promising re-entry program for realigned offenders has been developed and started through collaboration amongst the Sheriff’s Department, Health and Human Services, Probation and various service providers. Staff from these agencies are working collaboratively to provide a seamless continuum of services and supervision from jail to Probation for realigned offenders who are released from the RCCC to complete a term of mandatory supervision with Probation. The Sheriff’s Department and Probation established a shared data system for conducting the LS/CMI both in custody and after release. Eligibility Specialists help inmates enroll in healthcare and social service programs. Service needs are identified and services are provided, started and/or linked to inmates pre-release for a smooth transition back into the community where Probation ensures services are continued or started. These realigned inmates are provided direct transportation upon release from RCCC to the Probation Offices to support a transition that minimized risk of re-offense. The Sheriff’s and Probation Departments meet monthly to achieve the re-entry for these offenders.
## Community Corrections Partnership Membership
(November 2, 2015)

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>R. Ted Baraan</td>
<td>Chief Probation Officer</td>
</tr>
<tr>
<td>Hon. Steven Sanders</td>
<td>Presiding judge or designee</td>
</tr>
<tr>
<td>Margie Barrios</td>
<td>County supervisor or chief administrative officer or designee</td>
</tr>
<tr>
<td>Candice Hooper</td>
<td>District Attorney</td>
</tr>
<tr>
<td>Greg LaForge</td>
<td>Public Defender</td>
</tr>
<tr>
<td>Darren Thompson</td>
<td>Sheriff</td>
</tr>
<tr>
<td>David Westrick</td>
<td>Chief of Police</td>
</tr>
<tr>
<td>James Rydingsword</td>
<td>Department of Social Services</td>
</tr>
<tr>
<td>Alan Yamamoto</td>
<td>Department of Mental Health</td>
</tr>
<tr>
<td>Vacant</td>
<td>Department of Employment</td>
</tr>
<tr>
<td>Renee Hankla</td>
<td>Alcohol and Substance Abuse Programs</td>
</tr>
<tr>
<td>Krystal Lomanto</td>
<td>Office of Education</td>
</tr>
<tr>
<td>Diane Ortiz</td>
<td>Community-based organization</td>
</tr>
<tr>
<td>Vacant</td>
<td>Victims’ interests</td>
</tr>
</tbody>
</table>

The CCP meets monthly

## San Benito County

### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

#### Goal: Provide supervision of offenders in detention

**Objective:**
- Provide correctional deputies for San Benito County Sheriff's Office

**Measure:**
- Hire and maintain two correctional deputies for the San Benito County Sheriff's Office

**Progress:** In Progress

#### Goal: Enhance data collection capability and overall capacity for District Attorney's Office and Law Enforcement

**Objective:**
1. Provide appropriate staffing for District Attorney's Office
2. Provide data collection and reporting system for District Attorney's Office
3. Provide capability for Sheriffs Office to provide statistical report for realignment

**Measure:**
1. Supplement District Attorney's Office staffing with 0.50 FTE for prosecution of realignment cases
2. Implement case management system for District Attorney's Office
3. Implement modern Records Management System (RMS) and Jail Management System (JMS) for Sheriff's Office and camera system for Hollister Police Department

**Progress:** 
#1: Completed, #2: In progress, #3 RMS/JMS In progress, camera system completed

#### Goal: Provide treatment for substance abuse offenders

**Objective:**
- Ensure availability for sober living environment (SLE) beds for offenders

**Measure:**
- Contract with local provider to provide SLE beds

**Progress:** Completed
<table>
<thead>
<tr>
<th>Goal: Coordinate services to the re-entry population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Secure a location for a &quot;Community Transition Center&quot; where services can be provided and coordinated</td>
</tr>
<tr>
<td>• Provide staff for the Community Transition Center</td>
</tr>
<tr>
<td>• Secure services for the Community Transition Center</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• Obtain through lease or purchase of a location to house the Community Transition Center</td>
</tr>
<tr>
<td>• Select and appoint staff for the Community Transition Center</td>
</tr>
<tr>
<td>• Secure contracts, Memorandum of Understandings (MOU) or other agreements to provide services through the Community Transition Center</td>
</tr>
<tr>
<td><strong>Progress:</strong> In progress</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Enhance supervision of highest risk re-entry population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Provide staff to assist local law enforcement effort</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• Select and assign staff to partner with local law enforcement</td>
</tr>
<tr>
<td><strong>Progress:</strong> In Progress</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal: Increase capacity to provide services to re-entry population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
</tr>
<tr>
<td>• Provide enhanced educational and employment courses through local community college</td>
</tr>
<tr>
<td>• Support for substance abuse treatment</td>
</tr>
<tr>
<td>• Provide direct aid to clients for emergency housing and immediate concrete services needs</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
</tr>
<tr>
<td>• MOU with community college to provide courses and a part-time academic counselor</td>
</tr>
<tr>
<td>• MOU with behavioral health care services to contract with residential treatment provider</td>
</tr>
<tr>
<td>• Finalize process for accessing and accounting for funding of direct aid</td>
</tr>
<tr>
<td><strong>Progress:</strong> In progress</td>
</tr>
</tbody>
</table>
**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Aid to clients</td>
<td>$20,000</td>
<td>$30,000</td>
</tr>
<tr>
<td>Gavilan College</td>
<td>$50,000</td>
<td>$79,000</td>
</tr>
<tr>
<td>Youth Alliance</td>
<td>$50,000</td>
<td>$7,000</td>
</tr>
<tr>
<td>District Attorney's Office</td>
<td>$69,500</td>
<td>$100,000</td>
</tr>
<tr>
<td>Residential treatment services through BHCS</td>
<td>$100,000</td>
<td>$745,000</td>
</tr>
<tr>
<td>Sheriff's Office</td>
<td>$320,000</td>
<td></td>
</tr>
<tr>
<td>Services and Supplies</td>
<td>$10,000</td>
<td></td>
</tr>
<tr>
<td>Hollister PD camera system</td>
<td>$60,051</td>
<td>$176,000</td>
</tr>
<tr>
<td>Deputy District Attorney</td>
<td>$42,000</td>
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</tr>
<tr>
<td>Sober Living Environment</td>
<td>$36,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>Grow Strong Program</td>
<td>$7,000</td>
<td>$79,000</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>$116,000</td>
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<tr>
<td>Jail expansion</td>
<td>$100,000</td>
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<tr>
<td>Deputy Correctional Officers</td>
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<td>$215,420</td>
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<tr>
<td>Trainings</td>
<td>$10,000</td>
<td></td>
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<tr>
<td>Electronic Monitoring Program</td>
<td>$30,000</td>
<td>$421,360</td>
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<tr>
<td>Probation</td>
<td>$50,000</td>
<td></td>
</tr>
</tbody>
</table>

FY 2014-15: DA Case Management System & Computers to be determined

FY 2015-16 Allocation: balance remaining for reserve of $118,259

**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gavilan College</td>
<td>$50,000</td>
<td>$30,000</td>
</tr>
<tr>
<td>Electronic Monitoring</td>
<td>$30,000</td>
<td>$79,000</td>
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<tr>
<td>Sober Living Environment (SLE)</td>
<td>$36,000</td>
<td>$180,000</td>
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<tr>
<td>Grow Strong Program</td>
<td>$7,000</td>
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<tr>
<td>Behavioral Health</td>
<td>$79,000</td>
<td></td>
</tr>
</tbody>
</table>

FY 2015-16 - $260,000 FY 2014-15 - $122,000

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

- In FY 2014-15, $36,000 was allocated to Sober Living Environments (SLE).
- In FY 2015-16, $50,000 was allocated to Youth Alliance.
Responses to Optional Survey Questions

Does your county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No

Does your county consider evaluation results when funding programs and/or services?

No

Does your county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction and length of stay.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

19% of our allocation is directly tied to providing programs and services.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Cognitive Behavior Therapy through Thinking for a Change, Parent Project/family counseling, substance abuse counseling and residential drug treatment.

What challenges does your county face in meeting these programming and service needs?

Coordination of services to the re-entry population is a concern. We are establishing a "central hub" of services and supports for the re-entry population - our Community Transition Center. This is a new effort for the county. All stakeholders have acknowledged the importance of this effort. However, the planning and coordination involved in establishing a new site is daunting, but worthwhile.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
San Bernardino County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

Goal: Decrease likelihood of recidivism and/or psychiatric hospitalizations for probationers upon release to county probation supervision

Objective: • Increase accessibility to behavioral health treatment services along with providing continued engagement through outreach and supportive services
  • Reduce homelessness through placements at homes that offer proper care 24/7 and family-oriented support that encourages the importance of self-care and optimal wellness

Progress: Provided screening and linkage to community resources and case management for behavioral health needs to 1,786 probationers (28% increase from FY 2013-14) at Probation Day Reporting Centers (three locations); Provided housing placements with approved shelter services housing vendors for 224 probationers (135% increase from FY 2013-14) receiving treatment services with the Department of Behavioral Health behavioral health clinics co-located at the Probation Day Reporting Centers and the Forensic Services Colton location; Offered behavioral health services to 652 probationers (557 for mental health (MH) services; 95 for substance use disorder (SUD) services—173% increase for MH and 196% increase for SUD in FY 2013-14) at Probation Day Reporting Centers and Forensic Services Colton Location; transported 1,764 probationers to community behavioral health treatment services and other related community resources

Goal: Mitigate the use of illicit drugs/alcohol that contribute to criminogenic behavior and recidivism

Objective: • Increase accessibility of a full continuum of SUD treatment for probationers based on individualized needs

Progress: Department of Behavioral Health contracted community-based SUD organizations, offered SUD outpatient treatment services to 107 probationers and to 65 probationers placed in SUD residential treatment facilities

Goal: Enhance and expand public health education services and access to the affordable care act

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

**FY 2014-15 and 2015-16 Allocations to Public Agencies for Programs & Services**

- In FY 2014-15, $4,124,016 was allocated to the Department of Behavioral Health with $3,418,857 for Mental Health Treatment and $705,159 for Substance Use Disorder (SUD) Treatment.
- In FY 2015-16, $6,190,584 was allocated to the Department of Behavioral Health with $4,648,566 for Mental Health Treatment and $1,542,019 for Substance Use Disorder (SUD) Treatment.

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

*Cedar House Life Change Center: $248,200; Room and Board Facilities: $341,700; (Cedar House Life Change Center, Inland Valley Recovery Services, St John of God Health Care Services, Veteran's Alcohol Recovery Program at Gibson House: $260,000)

**Additional funding provided to Department of Behavioral Health from Probation (Inland Valley Recovery Services: $36,500 & St. John of God Health Care Services: $32,120)

*The county did not provide information for FY 2015-16*
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. As an example, contract with California State University San Bernardino Data Collection Committee Probation Research Unit.

Does the county consider evaluation results when funding programs and/or services?

Yes. For example the Probation Day Reporting Center compared success of GED contracted services to state averages which were low and as a result a new contract/program is being sought.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

San Bernardino County provides the following community-based services targeted for individuals with a criminal justice system history:

- Clinical assessment and comprehensive recovery-oriented treatment planning
- Intensive case management
- Intensive outpatient treatment for mental health and substance use disorders
- Psychiatric and medication support services
- Supportive housing, medical, financial and vocational assistance
- Day treatment rehabilitation
- Group therapy
- Substance abuse and alcohol screening and education
- Drug and alcohol individual, family and group counseling
- Crisis intervention

In addition to these targeted services, the county provides a comprehensive continuum of behavioral health services that include both outpatient and acute inpatient care. Residential and crisis management services include mobile community response teams, out-stationed triage engagement teams and crisis walk-in centers with some programs operating 24/7. The Probation Department also has 3 Day Reporting Centers where offenders can report and receive services or referrals, as well as Department of Behavioral Health staff who are stationed at these and other probation locations. San Bernardino County has a 211 phone system for all residents to call for assistance/referrals.
In Custody Programs:

- Alcoholic Anonymous/Narcotics Anonymous meetings at Central Detention Center (CDC), High Desert Detention Center (HDDC) and male Fire Camp
- Individual counseling and transition planning for male and female Fire Camp
- Job Readiness classes for male and female Fire Camp
- Volunteer Journaling Program (independent study) at CDC, HDDC and West Valley Detention Center (WVDC)
- Living Skills classes for male and female Fire Camp
- Microsoft Office Specialist Certification at Glen Helen Rehabilitation Center (GHRC)
- Pre-Trial Assistance to California Counties (PACC) Program at HDDC
- Parenting and Trauma classes for female Fire Camp
- Social Worker II visits and resource distribution at WVDC, male and female Fire Camp
- Substance Abuse classes at CDC and WVDC
- TALK classes for female Fire Camp

What challenges does your county face in meeting these programming and service needs?

Geography is a significant issue especially in rural areas such as Morongo Valley, Needles and Barstow.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
San Diego County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

**Goal:** To efficiently use jail capacity

**Objective:**
- Enhance pre-trial processes to more effectively use current jail capacity
  - Improve and streamline felony settlement

**Measure:**
- Change in percentage of jail capacity that is utilized for pre-trial detention, long term sentences and revocations

**Progress:**
One effort which supports managing the jail capacity in San Diego County includes the establishment of the Residential Re-entry Center (RRC), which is co-administered by the Sheriff and Probation Departments. Through our vendor, Correctional Alternatives Inc. (CAI), staff at the RRC provide work readiness training and alternate custody options to designated individuals. About 75 individuals, on average, are housed at the RRC at any given time. In January 2012, the Sheriff also created the County Parole and Alternate Custody (CPAC) unit to provide alternate custody options for eligible jail inmates. This unit was designed to identify eligible inmates who are appropriate to be released from custody and monitored with electronic monitoring and/or GPS supervision. As of December 7, 2015, 33% (1,768) of the offenders in custody were either 1170(h) offenders, or Post-Release Community Supervision (PRCS) offenders serving a revocation or flash incarceration in local custody. Also as of December 7, 2015, 241 non-PC 1170(h) offenders were participating in some sort of alternate custody through the CPAC Unit, which may include the following: county parole, fire camp, home detention, the RRC and work furlough. From July 9, 2012 through November 30, 2015, 187 participants completed Moral Reconation Therapy™ (MRT™), 95 participants completed substance abuse therapy and 17 participants completed anti-theft classes while on CPAC supervision.

<table>
<thead>
<tr>
<th>Community Corrections Partnership Membership</th>
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</thead>
<tbody>
<tr>
<td>(November 2, 2015)</td>
</tr>
</tbody>
</table>

| 190 Mack Jenkins                          |
| Chief Probation Officer                   |

| Hon. David Danielsen                     |
| Presiding judge or designee              |

| Ron Lane                                 |
| County supervisor or chief administrative officer or designee |

| Bonnie M. Dumanis                        |
| District Attorney                        |

| Henry Coker                              |
| Public Defender                          |

| William D. Gore                          |
| Sheriff                                  |

| Jim Redman                               |
| Chief of Police                          |

| Nick Macchione                           |
| Department of Social Services, Department of Mental Health and Alcohol and Substance Abuse Programs |

| Andy Hall                                |
| Department of Employment                 |

| Randy Ward                               |
| Office of Education                      |

| Charlene Autolino                        |
| Community-based organization              |

| Vacant                                   |
| Victims’ interests                       |

The CCP meets quarterly
**Goal:** To incorporate re-entry principles into in-custody programming

**Objective:**
- Provide in-custody programming
- Expand re-entry beds in jail(s)
- Create Mandatory Supervision (MS) Court to transition persons from jail to community supervision

**Measure:**
- Number of offenders served
- Opened East Mesa Re-entry Facility (EMRF) expansion (400 beds)
- MS Court began February 2013 and currently sees over 500 persons on MS

**Progress:** In June 2014, the county opened the EMRF, which includes in-custody and re-entry planning programming such as cognitive behavioral therapy and substance abuse treatment. Vocational and certificate programs at the EMRF include construction trades, printing press operation, janitorial services and computer graphics. Planning for release begins months and even years ahead of time for a smooth transition and success in the community. At any given time an average of 400 male inmates are receiving re-entry case management services at the EMRF. The Sheriff's Department has expanded in-custody program opportunities to a select group of high-security-level classification inmates housed at two of our detention facilities. The selection process for the participants includes a multidisciplinary approach between correctional counseling staff and sworn staff. Inmates who meet the eligibility criteria are offered psychosocial programming, educational and vocational classes, along with wellness courses designed to introduce and maintain a healthy lifestyle upon release. These inmates participate in a therapeutic community, which encourages accountability and responsibility through cognitive behavioral therapy as well as incentives and sanctions. Inmates are offered the opportunity to enroll in health care options offered through the Affordable Care Act prior to their release from custody. Community providers assist with enrollment, engagement and ongoing care in the community. In November 2015, the new DMV Identification Pilot Program began offering eligible inmates the opportunity to apply for and receive a CA DMV identification card prior to being released from custody. The first group of applicants were participants in the Veterans Moving Forward (VMF) and incentive-based Housing units at the Vista Detention Facility (VDF). The first batch was processed and 20 ID cards have been received. The program will gradually expand to all county detention facilities in 2016. A major component of the early planning for release includes our “Blueprint for Success,” which the justice partners developed for MS offenders. The plan was implemented on February 7, 2013 and includes a pre-sentence Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment an identified risks and needs. Once sentenced, the offender participates in the Sheriff’s Re-entry Program (if eligible). While in-custody, correctional counselors and on-site probation officers assist the offender to complete the goals as identified in the case plan. Approximately thirty days prior to release, the offender attends a pre-release review hearing in MS Court where progress toward the identified goals are assessed and the conditions and requirements of the offender’s community supervision are discussed. After release, regular status hearings are calendared for continued assessment of the offender’s progress. A step down Probation supervision approach using a three-phase model is utilized to assist in a successful reintegration into the community. If the offender becomes non-compliant, s/he may be dropped down to the previous phase. In FY 2014-15, 86% (465 out of 540) of MS split-sentenced offenders completed their term of supervision in the community without receiving a subsequent misdemeanor or felony conviction during the term of supervision.
**Goal:** Incorporate evidence-based practices into supervision and case management of PRCS offenders; encourage the use of evidence-based practices in sentencing for felony offenders

**Objective:**
- Encourage the use of evidence-based practices in sentencing for felony offenders (1. Provide results of risk and need assessments to all sentencing parties; 2. Train all parties on alternative sentencing and best practices for recidivism reduction)
- Provide evidence-based supervision and intervention services for PRCS offenders (1. Employ risk-based supervision—more intense supervision for higher risk offenders; 2. Employ swift and sure sanctions for non-compliant behavior; 3. Provide incentives for compliant behavior; 4. Refer to and monitor use of community-based treatment services)

**Measure:**
- Use of risk and needs assessments in sentencing
- Risk-based supervision and referrals to appropriate community-based services
- Use of incentives and sanctions and use of Integrated Behavioral Intervention Strategies (IBIS) in supervision

**Progress:** Throughout FY 2014-15, Probation continued to incorporate risk/need information in Probation sentencing reports. PRCS and MS offenders are assessed for levels of risk. As of December 2015, a total of 77% of PRCS are identified as high-risk, while a total of 53% of MS offenders are high-risk. During FY 2014-15, using Probation’s automated Community Resource Directory, an average of 86% of PRCS and MS offenders were referred to, and engaged in, at least one treatment service to meet an assessed criminogenic need. 99% of PRCS Offender Division officers are trained in motivational interviewing, cognitive behavioral interventions and IBIS. During FY 2014-15, 70% of San Diego County’s PRCS and MS offenders successfully completed their term of supervision. A total of 30% recidivated. (2,120 individuals completed supervision; 646 were convicted of a new felony or misdemeanor during their supervision term).

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Public Defender</th>
<th>FY 2014-15 - $740,000</th>
<th>FY 2015-16 - $740,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>District Attorney</td>
<td>FY 2014-15 - $1,090,000</td>
<td>FY 2015-16 - $1,090,000</td>
</tr>
<tr>
<td>Sheriff's Department &amp; Related Costs</td>
<td>FY 2014-15 - $30,050,000</td>
<td>FY 2015-16 - $35,280,000</td>
</tr>
<tr>
<td>Probation Department*</td>
<td>FY 2014-15 - $740,000</td>
<td>FY 2015-16 - $35,280,000</td>
</tr>
</tbody>
</table>

*Includes $9,000,000 in FY 14-15 and $8,300,000 in FY 15-16 budgeted to the Health and Human Services Agency.

FY 2014-15 Allocation: This amount considers the total cash received in FY 14-15, which includes FY 13-14 growth and FY 14-15 programmatic funding.

FY 2015-16 Allocation: As of Dec. 15, 2015, the county allocations were not finalized by the Department of Finance. Thus, the total cash received for FY 15-16 is not yet determined. This amount will consider the total cash estimated to be received in FY 15-16, which includes pending FY 14-15 growth amounts and will impact the FY 15-16 programmatic funding.

In FY 2014-15 and 2015-16 the Board of Supervisors adopted a budget in each FY based on estimated funds and recommendations of the CCP. The budget planning process considered the uncertainty of ongoing funding allocations beginning in FY 14-15 which were pending recommendations of the Realignment Allocation Committee. At the time the FY 15-16 budget was developed, only estimated allocation information was available. Additionally, the amount of FY 14-15 growth funds was not known and not included in the budget adopted in Aug. of 2015. Therefore, current budgeted amounts may not match final budgeted amounts or the total cash received at the close of this FY.
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- **Parole Revocation Activities***: $1,630,000 (FY 2015-16), $1,620,000 (FY 2014-15)
- **CTC****: $2,500,000 (FY 2015-16), $1,700,000 (FY 2014-15)
- **Services in the Community***: $12,790,000 (FY 2015-16), $11,700,000 (FY 2014-15)
- **Law Enforcement Analysis & Support**: $1,280,000 (FY 2015-16), $1,220,000 (FY 2014-15)
- **Data Collection, Analysis, Evaluation**: $15,190,000 (FY 2015-16), $15,190,000 (FY 2014-15)
- **Supervision in the Community**: $8,070,000 (FY 2015-16), $8,040,000 (FY 2014-15)
- **Re-entry Court Services**: $1,000,000 (FY 2015-16), $1,000,000 (FY 2014-15)
- **Sheriff’s Re-entry & Rehabilitation Facility**: $20,410,000 (FY 2015-16), $18,400,000 (FY 2014-15)
- **Alternative Custody**: $6,650,000 (FY 2015-16), $7,710,000 (FY 2014-15)
- **Victim Services**: $200,000 (FY 2015-16), $200,000 (FY 2014-15)
- **Custody Support**: $8,070,000 (FY 2015-16), $8,040,000 (FY 2014-15)

*Substance Abuse, Mental Health, Sex Offender Treatment, Housing; **Community Transition Center; ***District Attorney, Public Defender

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- **Re-entry Court Services**: $1,000,000 (FY 2015-16), $1,000,000 (FY 2014-15)
- **Community Transition Center**: $2,500,000 (FY 2015-16), $1,700,000 (FY 2014-15)
- **Substance Abuse, Mental Health, Sex Offender Treatment, Housing Services in the Community**: $12,790,000 (FY 2015-16), $11,700,000 (FY 2014-15)
- **Data Collection, Analysis, Evaluation**: $351,652 (FY 2015-16), $351,652 (FY 2014-15)
- **Alternative Custody**: $4,260,000 (FY 2015-16), $5,360,000 (FY 2014-15)

*FY 2015-16 - $70,070,000 | FY 2014-15 - $67,120,000*
The County of San Diego justice partners including Probation, the District Attorney’s Office, Sheriff’s Department and the Health and Human Services Agency have implemented a multi-agency data warehouse known as the “data hub”. The San Diego Association of Governments (SANDAG) has been selected as a research partner to utilize this data to fully measure and report on outcomes. SANDAG plans to incorporate an evaluation of programs and services in their AB 109 evaluation by utilizing data from the “hub” to document need and relate it to services received. SANDAG is also tracking the characteristics of who receives services, and will relate this data to outcomes. Additionally, within the Sheriff’s Evidence-Based Practice System (EBPS) is a module called Offender 360, which was developed by Tribridge using the Microsoft Dynamics CRM. Offender 360 EBPS will allow the County of San Diego's justice partners to collect, share and analyze programming information to measure the success of re-entry services by offender, population and program agency. Six different populations of offenders are tracked and analyzed; pre-trial, summary probation, formal probation, PC 1170(h), Post-Release Community Supervision (PRCS) and Parole. The system will allow authorized users to make more informed decisions regarding the implementation of re-entry services. Users will be able to track the success and challenges of offenders attending re-entry programming while in the community or incarcerated. Additionally, the system will track and identify the number of offenders returning to custody and the program they attended. This information will aid in identifying the success rate of various programs and assist in ascertaining the average cost of programming per offender. By collecting and analyzing the aforementioned data, we will be able to refine how we define, report, understand and manage recidivism within each member agency and across all member agencies. The Offender 360 in-custody is fully operational and all Sheriff's Re-entry Services Division and the County Parole and Alternative Custody Unit staff began using the system July 2015. We are continuing to work with the vendor on enhancements for provider access and the availability of analytics.

Does the county consider evaluation results when funding programs and/or services?

Yes, the county considers all available outcome data and evaluation results in combination with data on assessed needs, when prioritizing available funding.

Does the county use BSCC definitions when collecting data? If so, which?

As part of the county evaluation, SANDAG is utilizing various measures of recidivism. The evaluation is looking at outcomes while under supervision and for follow-up periods – up to 18 months from release. It considers booking for a new offense, as well as conviction for a new crime, and revocations. The evaluation also includes monitoring crime and arrest stats for the region in the aggregate. The Probation Department is seeking to apply the BSCC definitions when collecting data for various measures of program utilization and program outcomes.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. Of Probation’s Public Safety Realignment funds being utilized for treatment and intervention services, all are being used for evidence-based programming (EBP) treatments. At this stage, the County is now working to improve the fidelity of programming through the implementation of the Correctional Program Checklist (CPC).
The CPC was designed to assess correctional intervention programs and evaluate the extent to which these programs adhere to EBP including the principles of effective intervention. Indicators included in the CPC have been found to be correlated with reductions in recidivism and the process provides a standardized measure of program integrity and quality. The CPC report identifies the strengths and areas for improvement for a program as well as specific recommendations that will bring the program closer in adherence to EBP. By implementing the CPC, the Probation Department has been able to promote accountability, help programs increase the quality of the services they provide to our realigned population, assist in program development, stimulate research on the effectiveness of local treatment programs and use the outcome measures to evaluate funding proposals as well as external service contracts.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

San Diego has developed a robust continuum of mental health and substance use disorder services for these offenders through a partnership with the County’s Health and Human Services Agency’s Behavioral Health Division. For PRCS, individuals served through the Community Transition Center (CTC) are screened by a Behavioral Health Screening Team (BHST), and through collaboration with Probation, their behavioral health needs and the most appropriate treatment interventions are identified. Offenders are linked to the programs as indicated, which range from outpatient mental health or substance abuse clinics, Full Service Partnership/Assertive Community Treatment programs, residential substance abuse treatment, and/or detoxification. The CTC is co-located with a large residential substance abuse treatment program that can provide a seamless transition for those who would benefit from the program on-site. For offenders that may need mental health or other resources for substance abuse, they are linked to community-based providers contracted through the Health and Human Services Agency. The level of need for residential substance abuse treatment has resulted in some offenders having to stay longer at the CTC to wait for an available opening.

For Mandatory Supervision (MS) Offenders, the MS Court links them actively to the community behavioral health services and actively monitors their attendance and progress. If an individual is not progressing in a particular program, the supervising Judge may move them to another program that better meets their needs, or impose sanctions.

What challenges does your county face in meeting these programming and service needs?

There are two key challenges that San Diego is addressing. The first is system capacity. The vast majority of these offenders need some level of behavioral health services, and it is often the most intensive interventions of residential substance abuse treatment or Full Service Partnership programming for those who are severely mentally ill. Unfortunately, capacity of the programs does not meet the need, so at times offenders have to wait for services. While waiting, they may stay at the CTC or receive lower level services on an interim basis.

The second challenge is that the majority of the programs serve a variety of offenders as well as adults who are not involved with the criminal justice system. Interventions that may be appropriate for offenders, particularly high-risk offenders, may not be ideal for others. The county is implementing the CPC to review the various programs and identify areas that may be strengthened to meet the needs of offenders, while maintaining an appropriate program intervention for those not involved in the criminal justice system.
A key opportunity is the Drug Medi-Cal (DMC) Waiver. If the county elects to opt-in, the DMC Waiver may provide opportunities to expand residential substance abuse treatment and establish offender-specific programming.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Supervision of MS Offenders: To supervise the MS population, the CCP developed Mandatory Supervision Court, which began operating in February of 2013. Every offender sentenced to a split term participates in MS Court. The MS Court is the primary element of the CCP’s MS Plan.

To manage the MS offender population, Probation prepares an MS Plan which includes a Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment and a case plan based on the offender's identified risks and needs. Once sentenced, the offender participates in prescribed programming based on the assessments while in-custody, including Cognitive Behavioral Therapy, vocational programming and substance abuse treatment. With correctional counselors and on-site Probation Officers, MS offenders work to complete the goals as identified in Probation’s case plan.

Approximately thirty days prior to release, the offender attends a pre-release court hearing where the Court and the multi-disciplinary team, which includes an assigned Deputy District Attorney and Deputy Public Defender, a Correctional Counselor and assigned Probation Officer review the offender’s progress in custody and discuss the plan for transition to the community. The offender is then brought into court and the court informs the MS offender of the conditions and requirements of their MS.

After release from incarceration, regular status hearings are calendared in MS Court for continued monitoring of the offender’s progress. MS Court is held on a weekly basis. In addition to these regular status hearings, the Probation Officer will continue to update the case plan, monitor compliance and place the offender in appropriate programs based on the offender’s assessed risks and needs. All warrants are brought before the Judge and all revocations and modifications to the conditions are heard in MS Court.

One aspect of the MS Plan requires the offender to be monitored using a GPS device for a minimum of two weeks directly upon release from incarceration, with a strict curfew and various compliance meetings with the Probation Department. During FY 2014-15, 86% (465 out of 540) of MS split-sentenced offenders completed their term of supervision in the community without receiving a subsequent misdemeanor or felony conviction during the term of supervision.

Supervision of PRCS Offenders: San Diego County’s CTC was created and became operational in January of 2013 to facilitate the re-entry of PRCS offenders. With the implementation of the CTC, Probation officers are able to immediately assess and engage the offenders and connect them with services needed to successfully reintegrate into society. Upon arrival at the CTC, offenders are assessed for criminogenic needs and meet with the BHST. The BHST screens each individual for substance abuse and mental health needs. Staff is also available to conduct benefit eligibility screening and application assistance. While at the CTC, a preliminary case plan is developed and offenders are referred to initial services. Upon leaving the CTC and reporting to the assigned Deputy Probation Officer, offenders may be referred to additional services based on their specialized case plan.
Prior to the implementation of the CTC, PRCS offenders absconded directly upon release at an overall rate of 10%. As part of the operation of the CTC, every PRCS offender is picked up at the state prison from upon release and transported directly to the center. This transportation service effectively eliminates an offender’s ability to abscond. After the assessment process is complete, offenders are transported out of the center, either to a residence, shelter or treatment facility.

A new and innovative use of the CTC allows offenders (including MS offenders) who violate their community supervision terms and are in need of treatment to be referred to, and housed at, the CTC while awaiting availability of a residential treatment program. This temporary housing helps to save limited jail bed space and keeps the offender in a therapeutic environment until they can enter a program. During FY 2014-15, the CTC served a total of 2,078 offenders (1,374 PRCS, 315 MS, 298 PRCS violators, and 91 MS violators).
### San Francisco County

#### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

| Goal: Reduce probation revocations to state prison from San Francisco |
| Objective: San Francisco will achieve a 5% reduction in probation revocations to state prison in FY 2014-15 |
| Measure: Percent decrease in probation revocations to state prison |
| Progress: In FY 2014-15, San Francisco achieved a 25% decrease in probation revocations to state prison over the previous year |

| Goal: Increase successful termination rate of those completing community supervision in San Francisco in FY 2014-15 |
| Objective: 80% of individuals who terminate from community supervision will terminate successfully |
| Measure: Number of individuals who successfully terminate community supervision in FY 2014-15 |
| Progress: 83% of individuals completing community supervision in FY 2014-15 terminated successfully |

| Goal: Increase referrals to, engagement in and successful completion of services in FY 2014-15 |
| Objective: San Francisco Adult Probation will increase referrals to services in FY 2014-15 by 10% over the previous year |
| Measure: Number of individuals referred to services in FY 2014-15 |
| Progress: 1,247 referrals to services were made in FY 2014-15, a decrease of 35% from the previous year. San Francisco is currently implementing comprehensive performance reporting requirements for all service providers in order to monitor the rate of engagement of clients referred to services. Progress on this measure will be able to be quantified in the first quarter of 2016 |

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.
FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- In FY 2014-15, $2,503,742 was allocated to the Department of Public Health for behavioral health services and stabilization housing.
- In FY 2015-16, $2,503,742 was allocated to the Department of Public Health for behavioral health services and stabilization housing.

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- Five Keys Charter School: $54,170
- Phatt Chance Community Services, Inc.: $179,156
- Center on Juvenile & Criminal Justice: $997,571
- Tenderloin Housing Clinic, Inc.: $180,431
- Leaders in Community Alternatives, Inc.: $2,366,359
- Community Works West, Inc.: $91,268
- Charles A Flinton Ph.D: $175,000
- America Works of California, Inc.: $125,437

FY 2015-16 - $4,169,392
FY 2014-15 - $4,501,392
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The Adult Probation Department (APD) evaluates programs and services in a variety of ways: monthly client referrals, engagement/utilization reporting, quarterly reporting and annual program reporting. Additionally, the APD partners with academic and research entities to further define best responses to client needs and evaluate efficacy of recidivism reduction strategies. APD partners with George Mason University on a Risk Needs Responsivity tool, and with the Public Policy Institute of California (PPIC) on a multi-county recidivism reduction evaluation.

Does the county consider evaluation results when funding programs and/or services?

The APD, like other agencies in the City and County of San Francisco, conducts a competitive bid process to identify organizations who can integrate research-driven, best practices into service design and delivery. Once organizations are selected through the competitive bid, the ADP uses monthly, quarterly and annual report submission in its consideration of permitted continuation funding. APD's work with George Mason and PPIC will also help APD better understand local best practices for recidivism reduction, and will integrate report information into future funding decisions.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for average daily population, conviction, length of stay, and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. Evidence-based programming (EBP) language is an integral part of the competitive bid process. Responsive organizations adequately describe and embrace EBP in service design and delivery.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The APD work ordered $2,503,742 of AB 109 funds to the Department of Public Health (DPH) for behavioral health services and stabilization housing. The funds helped launch a Behavioral Health Access Center (BHAC) for clients of APD. BHAC services include behavioral health intake, assessment, care coordination of inpatient and outpatient substance dependency services and mental health services. Funds are also used for clean and sober, and stabilization housing.

The APD also funds an intensive case management program with clients under probation supervision who have complex mental health challenges, but who may not meet the medical necessity required to access the local public health system of care. This program’s services include intensive case management, and peer advocates that help clients navigate many layers of barrier removal.

The APD also funds substance dependency education services at its one stop re-entry center, and works with the center's lead services provider to ensure space is available for anonymous groups as well.
What challenges does your county face in meeting these programming and service needs?

While services needs and related capacity ebb and flow, San Francisco struggles with ample inpatient treatment capacity and detox beds. A large majority of clients under San Francisco APD probation supervision have multiple contacts with the criminal justice system over long periods of time and face a complex array of behavioral health needs. Costs associated with high impact behavioral health programs are high as they require hiring expert intensive case management, peer navigator staff, the integration of medical experts like psychiatrists who can assist in diagnosis and medication management, barrier removal funds, detox beds, inpatient services and continuing services even once a person's probation supervision expires. Locally, statewide and nationally, there must be recognition of the needs for a long-term continuation of care, and that high quality community-based behavioral health services come at a premium.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Expanded focus on participation in research and evaluation projects that will help inform best recidivism reduction next steps
- Increased focus on behavioral health interventions
- The APD has launched several innovative efforts
- Increased victim restitution services
- Risk-Based Sentencing
- A pilot of a Leadership Academy that integrates pro-social, recreational and skills building activities into service design and is showing positive results early-on

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
San Joaquin County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

Goal: Reduce the recidivism rate of AB 109 offenders in San Joaquin County

Objective:  
- Evaluate AB 109 offenders at the 1-year, 2-year timeframes until the 3-year baseline recidivism rate can be established  
- Evaluate various programs and strategies for effectiveness at reducing recidivism

Measure:  
- Rate of technical violations  
- Rate of arrests  
- Rate of convictions

Progress:  
The 2015 Annual Report evaluated recidivism rates for Post-Release Community Supervision PRCS and mandatory supervision (MS) offenders at the 1-year and 2-year timeframes from the start of supervision. The second year cohort of PRCS offenders at the 1-year mark had a 1% reduction in arrests and a 2.8% reduction in convictions from the first year cohort. The second year cohort of MS offenders at the 1-year mark had a 1.9% reduction in arrests and a 6.2% reduction in convictions from the first year cohort.

Goal: Increase the success of the Pre-Trial Assessment and Monitoring Program in San Joaquin County

Objective:  
- Increase the success of pre-trial defendants appearing for all scheduled court appearances  
- Decrease the number of pre-trial defendants committing a new offense while going through the court process  
- Increase the percentage of time the judge follows the detain/release recommendation from pre-trial services

Measure:  
- Percentage of defendants attending all scheduled court appearances  
- Percentage of defendants who do not commit a new offense while going through the court process  
- Percentage of time the judge follows the pre-trial recommendation

Progress:  
San Joaquin County produces a monthly data dashboard and a quarterly report regarding the Pre-Trial Assessment and Monitoring Program. In the last quarterly report, of the 285 defendants placed on pre-trial monitoring, 94% attended all scheduled court appearances and 96.8% did not have a new arrest while going through the court process. In the last quarterly report, the judge followed the detain/release recommendation 76% of the time.
Goal: Increase the success of the Adult Day Reporting Center for AB 109 clients

Objective:
- Increase the participation of clients in the Day Reporting Center
- Increase the dosage hours of evidence-based programming for participants

Measure:
- Number of participants enrolled in the Day Reporting Center
- Number of evidence-based programming hours completed by participants
- Number of days until participants can begin evidence-based programming once accepted into the program

Progress: The Probation Department contracted with the University of Cincinnati Correctional Institute to redesign the Day Reporting Center. The new program went into effect in January 2015. A preliminary evaluation of the program was completed looking at the first four months of the program's redesign. There were 73 clients who had been enrolled in the program for at least 120 days. Through the addition of numerous class offerings as well as open groups, clients were able to start attending evidence-based programming within two days of enrollment. Of the 73 clients, the average dosage was 19.5 hours of evidence-based programming. Evaluation data showed that the rates of arrests and convictions decreased with the increase in dosage hours. Clients who received no evidence-based programming had arrest rates of 31.6% and convictions rates of 26.1%. Clients with 1 to 19.5 hours of evidence-based programming had an arrest rate of 26.1% and no convictions. Clients who had twenty or more hours of evidence-based programs had no arrests and no convictions during the sample period. These findings are statistically significant.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

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<thead>
<tr>
<th>Public Defender</th>
<th>$228,469</th>
<th>$214,085</th>
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FY 2015-16 - $17,314,374    FY 2014-15 - $16,390,042
**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

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<tr>
<th>Program</th>
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<tr>
<td>Vocational education*</td>
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<td>Outpatient psych meds</td>
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<tr>
<td>Supportive services for job training</td>
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<td>Clients needs</td>
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*In-custody; **Incentives
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<td>Mary Magdalene Community Services</td>
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<td>Fathers &amp; Families of San Joaquin</td>
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<td>El Concilio</td>
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<td>Community Partnership for Families</td>
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<tr>
<td>Friends Outside</td>
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FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- **Friends Outside**: $236,554 ($236,554 for FY 2015-16 and $236,554 for FY 2014-15)
- **Community Partnership for Families**: $160,000 ($160,000 for FY 2015-16 and $160,000 for FY 2014-15)
- **El Concilio**: $160,000 ($160,000 for FY 2015-16 and $160,000 for FY 2014-15)
- **Fathers & Families of San Joaquin**: $160,000 ($160,000 for FY 2015-16 and $160,000 for FY 2014-15)
- **Mary Magdalene Community Services**: $160,000 ($160,000 for FY 2015-16 and $160,000 for FY 2014-15)
- **San Joaquin Community Data Co-Op**: $156,856 ($156,856 for FY 2015-16 and $160,000 for FY 2014-15)
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, we contract with the San Joaquin Community Data Co-Op to conduct an annual evaluation report of our AB 109 programs and strategies. For the 2015 report, we looked at four cohorts of offenders and recidivism information in terms of revocations, arrests and convictions. The four cohorts were Post-Release Community Supervision (PRCS) and Mandatory Supervision (MS) offenders who had completed two full years of supervision as well as PRCS and Local Community Supervision (LCS) offenders who had just completed their first full year of supervision. The 2016 Evaluation Report will provide us with our baseline recidivism rate as we will have the 3-year recidivism rates. We will continue to also look at the one-year and two-year marks as well. The annual evaluation report also looks at recidivism information for each of our three funded collaborative court programs as well as the four community-based organizations that provide case management services. The report also breaks down recidivism information by service/program referral (i.e. WorkNet, Day Reporting Center, Behavioral Health Services, Human Services Agency, etc.).

Does the county consider evaluation results when funding programs and/or services?

To date, evaluation results have been preliminary due to the timeframe the programs and services have been in place. Challenges have been that not all programs and services were in place a full year period as well as there were not enough resources to increase funding for our base plan. The Executive Committee plans on using the findings from the upcoming 2016 report to make plan additions and modifications to existing budgets. There are now additional funds available to San Joaquin County to make this happen.

Does the county use BSCC definitions when collecting data? If so, which?

During 2015-2016, San Joaquin County modified its definition of recidivism to align with the BSCC's definition. This definition will be followed for the 2016 Evaluation Report. San Joaquin County uses the definition for "average daily population" in the monthly data dashboard that is presented to the CCP. We currently do not track "length of stay." During 2015-2016, San Joaquin County will adopt the BSCC definition for "Treatment Program Completion Rates."

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%. The San Joaquin County Probation Department follows the eight Principles of Effective Interventions in providing pre-trial monitoring and supervision services. Our CCP Plan incorporates these principles not just from the work of the Probation Department but through our partner agencies. These principles include using validated risk and need assessments, using motivational interviewing and Effective Practices in Community Supervision, developing case plans that target interventions to the top criminogenic needs, using a Sanctions Matrix for alternatives to detention, increasing positive reinforcement through a Rewards Matrix, engaging ongoing support in natural communities through the work of the community-based organizations, providing a range of cognitive behavioral interventions that are provided by probation officers, behavioral health services staff and community-based organizations, as well as being committed to evaluation efforts to ensure our programs and strategies are having the intended results.
This work is accomplished through our monthly data dashboard, the annual AB 109 Evaluation, the monthly Pre-Trial Dashboard, the quarterly Pre-Trial Report, the annual Pre-Trial Report and the quarterly and annual evaluations studies of the Day Reporting Center. In addition to using Motivational Interviewing techniques and Effective Practices in Community Supervision, we offer a range of evidence-based programs to our clients which include Thinking for a Change, Common Sense Parenting, Women Moving On, Aggression Replacement Training®, Cognitive Behavioral Interventions—Substance Abuse (CBI/SA), Matrix, Seeking Safety and Moral Reconciliation Training™. The Day Reporting Center also provides an Orientation, Foundations, Anger Control Training (ACT), Social Skills, Problem Solving and Advanced Practice cognitive behavioral therapy groups.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

We can access many different types of substance abuse services in our county ranging from private providers to county-operated programs. We use four different residential treatment programs for those suffering from substance addictions: Recovery House, which is a county program, New Directions, Circle of Friends and Salvation Army, which are all private non-profit providers.

In our county we use the following providers for outpatient treatment for substance addictions: Chemical Dependency Counseling Center (CDCC), which is a county program. The private providers we access are: Service First, Valley Community Counseling and Pacific Center for Addiction Services.

For mental health services in our county we have been able to team up with San Joaquin County’s Behavior Health Services for placement of a Mental Health Clinician in each of our Court programs (courtesy of a SAMHSA grant). The clinician is able to place an individual needing assistance on a fast track to much needed mental health services. The clinician is also able to notify the court of missed appointments or any issues with medication compliance. We also contract with Holt Counseling who provides various counseling services; such as domestic violence, family issues, victims of sexual assaults and post-traumatic stress.

We have a number of ancillary services used as well. For example, we use the Gibson House to help cover the cost of client’s prescription medications, Community Medical Center (Channel Medical) for those needing free and low cost medical attention, St. Mary's Dining Room for assistance with meals, dental needs and identification vouchers. The Gospel Center Rescue Mission and The Stockton Shelter for the homeless are used for emergency shelter. Women’s Shelter for no cost counseling for victims of domestic violence and sexual assaults. The Community Center for the Blind and Visually Impaired helps with glasses for many of our clients. Father’s and Families of San Joaquin County, Friends Outside and Mary Magdalene Community Services all assist our clients with re-entry skills and guidance.

What challenges does your county face in meeting these programming and service needs?

Even with all these resources, we are still faced with serious challenges to help our clients successfully reintegrate. These challenges are:

1. Our county lacks social and/or medical detox facilities
2. We currently only have two programs to assist with job training who also provide employment opportunities: WorkNet and Goodwill
3. Affordable long term housing
4. Many times our clients go on a waiting list for our County residential programs. This can mean a client has to remain in-custody until a bed is available.

**What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?**

The process we created for the community-based organization compliance monitoring for all community-based organizations has helped to ensure accountability, consistency and transparency to make sure there is fiscal responsibility. This lengthy process is done once a year with a report going to the Executive Committee. The process includes a self-monitoring report, a site visit, a contract agency staff interviews, an internal staff interviews, a participant interviews, file reviews, a semi-annual review, a final summary evaluation, a follow-up/assistance report, a corrective action plan and a correction action plan progress review. We would be willing to share this with other counties.

**Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.**

With the assistance of the University of Cincinnati Correctional Institute (UCCI), the Day Reporting Center was re-designed in January 2015. The goal of the redesign was multi-fold: to increase client participation, increase the dosage of evidence-based programming and reduce the wait time between entry points for evidence-based programming. The program consists of three phases and aftercare. During Phase I, clients report 5 days a week and focus on orientation, assessment and treatment planning. Phase II requires clients to report four days a week, complete the Foundations class (which is a component of Thinking for a Change created by UCCI), 10 Social Skills groups and two cycles of Problem Solving groups. In Phase III, clients are required to report three days a week. During this phase, clients will complete a treatment series based on their top criminogenic needs: Option 1 - Cognitive Behavioral Interventions for Substance Abuse (28 classes); Option 2 - ACT, Social Skills 2, and 1 series of Problem Solving (23 classes); or Option 3 - Social Skills 2, Social Skills 3 and 1 series of Probation Solving (23 classes). To track dosage hours, we have created a passport, that also serves as a visible update for program completion. In Phase III, clients are also eligible to participate in a Vocational Education Program ran by Northern California Construction and Training (NCCT) in partnership with the San Joaquin County Fairgrounds. During the first four months of the NCCT program, participants completed the following classes: Safety, Footings and Foundations, Framing, Blueprint Reading and Construction Math.

During the first four months of the DRC redesign, there were 73 clients who had been enrolled for at least 120 days. Recidivism rates were: 8.2% had a violation of probation, 16.4% had at least one arrest and 5.5% had at least one conviction. The data showed statistical significance in that levels of recidivism were reduced by increased hours of evidence-based programs. Those with no evidence-based programming hours had the highest recidivism rates with an arrest rate of 31.6% and conviction rates of 26.21%. Those clients with 1 to 19.5 hours of evidence-based programming had an arrest rate of 26.1% but did not have any convictions. Clients who had 20 or more evidence-based programming hours had no arrests and no convictions during the study period.
Community Corrections Partnership Membership
(November 2, 2015)

James E. Salio
Chief Probation Officer

Susan Matherly
Presiding judge or designee

Geoff O’Quest
County supervisor or chief administrative officer or designee

Dan Down
District Attorney

Patricia Ashbaugh
Public Defender

Ian Parkinson
Sheriff

Robert Burton
Chief of Police

Lee Collins
Department of Social Services

Anne Robin
Department of Mental Health

Vacant
Department of Employment

Star Graber
Alcohol and Substance Abuse Programs

D.J. Pettinger
Office of Education

Biz Steinberg
Community-based organization

Vacant
Victims’ interests

The CCP meets monthly

San Luis Obispo County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

Goal
- To maintain maximum public safety
- To improve offender success rates and reduce recidivism
- To increase alternatives to incarceration and treatment support for low-level offenders

Objective
Objectives and outcome measures development ongoing

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

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<tr>
<th>Agency</th>
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<td>$3,012,168</td>
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FY 2014-15 Allocation: Total includes allocation of $6,016,751 and $168,515 of prior year unspent funds
FY 2015-16 Allocation: Total allocation includes prior year unspent funds of $7,577
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- Drug Testing: $21,000
- Co-occurring Disorder Services: $89,261
- Tattoo Removal Services: $45,000
- Cognitive Behavioral Treatment: $68,000
- Sober Living Housing: $339,828
- Re-entry Services: $1,353,043
- Court Processing Services: $142,959
- Public Defender Court Advocate: $81,000
- District Attorney PRCS Prosecution: $76,518
- Electronic Monitoring: $44,550
- Probation Post-Release Supervision: $742,611
- In-custody services: $4,425,676

FY 2015-16 - $7,429,446
FY 2014-15 - $6,478,084

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- The county reported no allocations to non-public agencies for programs and services.
**Responses to Optional Survey Questions**

**Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?**

The Sheriff’s Office, Probation Department and Behavioral Health Department are in the process of developing measurable data points to assist in determining which programs and services are in alignment with the strategic goals of the Realignment Plan and are effective in changing offender behavior and reduce recidivism.

**Does the county consider evaluation results when funding programs and/or services?**

Yes. new programs or services requesting realignment funding must include desired results to be achieved in their proposal.

**Does the county use BSCC definitions when collecting data? If so, which?**

No.

**Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?**

21-40%

**We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?**

The following are available services to AB 109 offenders:
- Substance abuse treatment (Jail and community)
- Co-occurring disorder treatment (community)
- Cognitive behavioral treatment (Jail and community)
- Tattoo removal services (community)
- Case management services (community and Jail)
- Sober living placement (community)
- Post-Release Offender Meeting (wraparound service outreach)
- Welding apprenticeship program (Jail)
- Vocational workshops (Jail)
- Mentoring services (Jail and community)
- Bakery apprenticeship program (Jail)
- Trauma workshops (Jail)
- Employment training workshops (Jail)

**What challenges does your county face in meeting these programming and service needs?**

Priorities for FY 2015-16 will include addressing housing and employment needs of inmates and offenders, expand jail programs and services to meet the needs of inmates in the higher security housing areas, maintain timely and quality treatment services, ongoing prioritization of developing an integrated database system and enhancing data collection capacity.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

No.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

1. The Sheriff's Office Jail Programs Unit continues to work on utilizing evidence-based practices by adopting a validated risk/needs assessment tool to determine an inmate's likelihood to reoffend and identify programming services to address criminogenic needs. As of October 15, 2015, the total number of inmates assessed was 217, approximately 78% were assessed as medium or high-risk.

2. The Probation Department, through the use of a validated risk/needs assessment tool and case plans, referred 81% of AB 109 offenders to the Behavioral Health Department for further evaluation to determine suitability for post-release treatment services.

3. The Behavioral Health Department's community-based post-release treatment program served 229 new or continuing clients in FY 2014-15. The average stay of treatment services was 180 days and 91.4 days in sober living housing services. The successful completion rate was 55%, consistent with the previous year’s treatment completion rate.
## San Mateo County

### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

**Goal:** Reduce the public safety impact of the Post-Release Community Supervision (PRCS) and mandatory supervision offenders to the community by implementing evidence-based supervision strategies

**Objective:**
- 70% of supervisees will successfully complete supervision

**Measure:**
- Percent of supervisees who successfully complete supervision (normal and early termination)
- Percent of supervisees who unsuccessfully complete supervision
- Percent of supervisees who violate a condition of their supervision by committing a new crime in San Mateo County

**Progress:** Between July 2014-June 2015, 77% of supervisees successfully completed supervision

---

**Goal:** Measure the impact of the realignment population on San Mateo County Adult Correctional Facilities

**Objective:**
- Percent of realignment inmates were booked into the San Mateo County Jail for a new crime committed in San Mateo County

**Measure:**
- Percent of new crimes by categories (i.e. crimes against persons, property, drug/alcohol (possession/sale) of the realignment population booked into jail for a new crime in San Mateo County

**Progress:** The annual average percentage of in custody AB 109 population is 18%. The top crime categories for the newly sentenced 1170 (h) population are: 41% (drug & alcohol); 54% (property); 3% (crimes against persons) and 2% (other)
Goal: Increase rehabilitative services (including employment, health benefits, mental health and alcohol and drug treatment) received by PRCS and Mandatory Supervision clients post-incarceration.

Objective:
- 83% of inmates will receive a comprehensive medical visit/assessment through the Public Health Mobile Clinic.
- 57% of supervisees who participated in 550!Jobs will secure employment.
- 64% of supervisees referred entered and completed alcohol and drug (AOD) treatment programs.

Measure:
- Percent of inmates receiving comprehensive medical visits/assessment through the Public Health Mobile Clinic.
- Percent of supervisees who have participated in the 550!Jobs program who secure employment.
- Percent of supervisees that entered and completed AOD treatment programs.

Progress: Between July 2014-June 2015, 66% of supervisees that participated in 550!Jobs secured employment, 55% received comprehensive medical visits through the Public Mobile Health Clinic and 56% satisfactorily completed AOD treatments.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

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<th>Public Agency</th>
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<td>Court Commissioner</td>
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<tr>
<td>Local Law Enforcement Training</td>
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<td>CCP Competitive Community Grants</td>
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<td>Human Services Agency</td>
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</tr>
<tr>
<td>Health System*</td>
<td>$2,111,252</td>
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<tr>
<td>District Attorney's Office</td>
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<tr>
<td>Sheriff's Office</td>
<td>$5,183,566</td>
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<td>Probation Department</td>
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<tr>
<td>Superior Court</td>
<td>$174,375</td>
<td>$174,375</td>
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</tbody>
</table>

FY 2014-15 and FY 2015-16 Allocation: *Includes alcohol and other drug treatment, mental health services as well as correctional health therapists.
**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

<table>
<thead>
<tr>
<th>Service</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Probation****</td>
<td>$66,034</td>
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<tr>
<td>Other client services*****</td>
<td>$180,132</td>
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<tr>
<td>Housing***</td>
<td>$292,500</td>
<td>$268,581</td>
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<tr>
<td>Employment**</td>
<td>$500,000</td>
<td>$261,347</td>
</tr>
<tr>
<td>Health System*</td>
<td></td>
<td>$1,093,087</td>
</tr>
<tr>
<td>Family Reunification Services****</td>
<td>$75,000</td>
<td>$22,529</td>
</tr>
</tbody>
</table>

*includes alcohol and other drug treatment, mental health services, correctional health therapists; ** includes 550!Jobs (vocational training program), job development specialist position; *** includes emergency housing/hotel vouchers, transitional housing, rental assistance; **** includes community mentor, family reunification and meetings; ***** includes assistance and support services (DMV, licensing, assessments), food, clothing, transportation vouchers (bus passes, grocery gift cards), ****** includes GPS services.

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Read</td>
<td>$51,500</td>
<td>$51,500</td>
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<tr>
<td>One East Palo Alto</td>
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<td>$195,000</td>
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<tr>
<td>Service League of San Mateo</td>
<td>$92,482</td>
<td>$92,482</td>
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<td>Our Common Ground</td>
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<tr>
<td>El Centro de Libertad</td>
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<td>$110,000</td>
</tr>
<tr>
<td>Job Train, Inc.</td>
<td></td>
<td>$190,000</td>
</tr>
</tbody>
</table>

*FY 2015-16 - $773,982  FY 2014-15 - $773,982*
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, San Mateo County includes performance measures and goals in the contracts executed with community-based organizations (CBOs). In our Request for Proposal (RFP) documents, the County establishes that all those who apply must be able to meet performance goals and measures as well as maintain files and records for reporting requirements. CBOs awarded CCP grants work closely with County staff to ensure that these goals are met or if there are improvements that are needed to maintain effective service delivery to clients.

Does the county consider evaluation results when funding programs and/or services?

San Mateo County is committed to ensuring that the programs and services provided to the realignment population truly help clients become productive members of the society and are able to assist them as they re-enter their own communities. Monthly multidisciplinary meetings are held to assess the effectiveness of client-centered programs. These are also reported to the CCP on an as-needed basis.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for average daily population, conviction and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. San Mateo County's CCP has determined it is important to fund programs that reduce recidivism, meet the rehabilitative needs of the realigned populations and are grounded in evidence-based practices (EBP). With this commitment, we acknowledge that there is a need to enhance the understanding of the 8 Principles of evidence-based practices in our community. On March 9, 2015, the County hosted an EBP workshop conducted by Dr. Natalie Pearl that was attended by community-based organizations throughout the county. Subsequently, our second round of Request for Proposals (RFP) was released the same day with the caveat that programs need to adhere to one or more of the 8 Principles. Out of this RFP, a total of approximately $773,982 was allocated to 6 community-based organizations, with services ranging from supportive transitional housing, job training and placement as well as recovery services.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The San Mateo County Health System’s Behavioral Health and Recovery Services Division assists adults, older adults and families with prevention, early intervention and treatment of complex mental illness and/or substance abuse conditions. The Public Health Division’s mobile clinic receives patients from our re-entry population, initiates care and supports establishment of primary health care relationships throughout our county. San Mateo Medical Center’s Medical Emergency and Psychiatric Emergency departments stabilize clients at acute risk. Each of these entities coordinates with a larger network of privately and publicly funded providers.
Behavioral Health provides mental health services to individuals eligible for Medi-Cal and/or members of the Health Plan of San Mateo through outpatient clinics and a network of community agencies and independent providers offering outpatient services, residential treatment, rehabilitation, and other services. Our county created the Service Connect Program as a multi-departmental partnership to meet the re-entry needs of our realigned population. We have since expanded eligibility to a larger portion of our re-entry population. The Service Connect Behavioral Health team screens for care needs including medical, mental health and substance use recovery. Mental health providers at Service Connect assess, diagnose, treat and offer clinical case management to our clients. This includes psychiatry offered on site and arranged through our county’s clinics and provider network. Behavioral Health contracts with Telecare Corporation in a full service partnership to meet broader needs such as housing, rep payee, and most health care for severely mentally ill adults who require such extensive service.

Clients receive peer support from individuals with lived criminal justice rehabilitation and recovery experience. Both Human Services Agency and Behavioral Health employ peer mentors to accompany new clients from custody to our program site. These experienced and skilled peers might also guide through any of the service contacts they need to complete anywhere within the health system or other service systems. Behavioral Health additionally contracts with Voices of Recovery, a peer organization, for group and individual support to clients on site and in the community.

Behavioral Health and Recovery Services offers a broad range of services for the prevention and treatment of drug and alcohol disorders. We administer funds from federal, state and local sources and provide substance use consultation, assessment, linkages and referrals to a network of contracted community-based substance use treatment providers throughout the county.

Alcohol and Other Drug treatment services include: detoxification, outpatient, residential and medication assisted treatment. Services are available to San Mateo County residents on sliding fee scale. No one is turned away for lack of funds. Pregnant and parenting women receive priority admission.

Assessment - The Alcohol and Other Drug Services (AOD) staff provides assessment services to San Mateo County residents involved in court programs, CalWORKs, Child Protective Services, Prop 36, Shelter Network and other county programs. After assessment, clients gain referrals to appropriate substance abuse treatment providers. Clients may also receive referrals to other supportive programs to receive services such as counseling, job training and placement, housing resources and childcare.

Ancillary Services - Through co-location with Human Services Agency, including Vocational Rehabilitation Services, Service Connect assessors/case managers coordinate closely on site with social workers, benefits analysts, vocational rehabilitation counselors and job developers. Through referrals, clients may access a much broader range of services in education, parenting, citizenship, etc.

Detoxification Services - These facilities provide 24-hour, supervised, non-medical withdrawal from alcohol and other drugs.

Drug Court - As a specialized program, the San Mateo County Drug Court addresses the needs of non-violent, drug-dependent defendants. Those eligible for Drug Court may participate in it instead of serving a County Jail sentence. A participant must attend all court reviews, enroll and complete a substance abuse treatment program, submit clean drug tests, and abide by any other directives of Drug Court. The Drug Court utilizes a team case management approach to serve the clients. The "team" is comprised of the judge (team leader), probation officers, own recognizance (OR) program, prosecutors, defense attorneys, AOD Services Case Managers/
Assessment Specialists and treatment professionals. The team works collaboratively to develop a strategy to address the client's needs in an effort to decrease the likelihood of relapse, re-offense, and re-entry into the criminal justice system.

- **Outpatient Treatment** - Outpatient sites offer flexible service intensity matching the acuity of recovery need. This includes individual, group, vocational and educational counseling offered during convenient hours, including evenings.

- **Prevention Services** - Information and referral, education, and support services are available both to the community at large (including people in the earliest stages of experiencing alcohol and other drug problems) and for family members and significant others of clients enrolled in the managed care system.

- **Residential Treatment** - Residential treatment consists of structured, live-in programs at licensed treatment facilities for men, women and women with children ages five and under. The treatment goal here is client stabilization. Services include individual, group, vocational and educational counseling. Our county has dedicated funding to cover 90-day residential treatment courses for our realigned and some re-entry populations.

- **Transitional Housing** - This service is geared exclusively for those in outpatient treatment who either need a safe environment or who require temporary housing. It provides a great opportunity for clients to develop a support system while receiving outpatient services. There is also specialized housing for women in reunification. Our county has dedicated funding to cover 60-day transitional housing stays for our realigned and some re-entry populations.

- **Special Programs** - Addiction Medicine and Therapy Program. This outpatient program offers medication assistance treatment for opioid addiction. The program offers both medically supervised withdrawal and maintenance treatment for persons who are opiate-dependent. Treatment requires rehabilitation counseling and offer clients HIV counseling and testing.

- **Integrated Medication-Assisted Treatment (IMAT) Program** - Launched in 2015, this program works closely with emergency departments and county/community providers to coordinate outreach, assessment, prescription and ongoing administration of medication to help adults recover from substance dependence, including alcohol dependence.

- **Perinatal Services** - Intensive individual and group counseling is available for pregnant and parenting women. Opiate-dependent women may receive medically supervised methadone maintenance or detoxification treatment. Programs focus on women's issues, domestic violence and parenting. Children through age three may join on-site child care.

**What challenges does your county face in meeting these programming and service needs?**

- Real estate and housing costs continue to rise in our county, jeopardizing the viability of providers who also grapple with changes in federal and state requirements for reimbursement of their services. Clients unable to stabilize their housing often cannot focus their energy fully on their medical health, mental health or substance use recovery. Several circumstances connected to homelessness exacerbate medical and mental health symptoms and promote substance use. Clients subject to sex offender registration continue to encounter more challenges than the rest of our population in securing permanent housing.

- We will likely remain on a perpetual learning curve in developing a consistent, thoroughly informed, evidence-based and culturally sensitive approach to the unique, complex trauma history that nearly every client carries into our contacts. Even a summary assessment typically reveals multifaceted trauma spanning from an early age and layering through community
violence, family disruption, incarceration and many other experiences. To adequately address these trauma experiences alongside client health and basic resource concerns continually challenges our individual service relationships (e.g., managing client trauma reactions to shared living arrangements in order for the client to complete residential treatment). It also challenges our larger program decisions (e.g., how to keep our program site sufficiently structured/safe/secure and also sufficiently welcoming to our clients who associate guards, checkpoints and access restriction with incarceration).

- Balancing our clients’ needs as both victims and perpetrators poses several challenges for us. At the same time that we can improve our address of trauma histories, we also find much potential to improve consistency and coordination in addressing antisocial thought, behaviors, attitudes and tactics. Especially when we share a person’s case among several departments, what we assess and how we would address it can look very different to each partner in the collaboration. These varying conceptualizations and approaches may or may not prove compatible. Many times, we can rally around setting a particular limit or promoting a particular support, but doing both in the context of several situations over the course of a week can elude our current capacity for coordination.

- The successes of our multidisciplinary re-entry programs have prompted broader financial and political support and prompted an expansion of scale in client referrals, staffing and partnerships. We are outgrowing several of the operational models that have served us on a smaller scale. As we evolve our program models, we seek to efficiently serve more people in coordination with more providers while maintaining fidelity to key principles and practices that have worked well for our clients. Any change within one department’s operation creates multiple unanticipated impacts for the other departments interfacing to provide services to clients in common. Coordinating our procedures, especially during further program development, challenges us to balance several shifting perspectives.

- Utilization management and aftercare require further development, as a growing number of re-entry clients proceed through our service course and then seek further supports in the community. Even while we have expanded, we cannot continue serving many of these clients and also welcome new clients at the pace they are referred for service. This situation obliges us to include within our services preparation for clients to usefully engage other services and systems.

- We also need to remain distinct from those systems in the ways that make our program uniquely conducive to engaging our new clients.

- As well, we seek to cultivate within those systems some movement toward compatibility with the ways of working that we have developed, as well as increasing receptivity to the clients that we send them. Many of the clients who come to us have experienced failures in meeting their needs through the service systems to which we would send them. Many logistic, attitudinal, and operational barriers contributing to those failures remain intact in our systems, challenging us to continue building relationships with a broad range of providers. Through those relationships, we can advocate changes to improve service outcomes for our population.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

In March 2014, San Mateo County implemented the Unified Re-entry Plan that provides for a seamless transition from in-custody case management services to comprehensive out-of-custody services upon release for offenders who are at moderate (medium) or high-risk to recidivate. The goals of the re-entry system are to reduce recidivism and to achieve stability and pro-social
behaviors. San Mateo County stakeholders (Sheriff, Probation, Health and Human Services Agency) have partnered to provide needed programs and supports, beginning in custody and continuing through release to community supervision and services. The coordination between in-custody and out-of-custody case management is key in order to ensure the released individual is connected to services immediately upon release.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In January 2015, the County re-opened the David Lewis Community Re-entry Center in East Palo Alto. This center serves as a hub for services focused on those coming from prison and back to their communities, in an area with the highest need in the County. Each service component offered in the center is evidence-based or a best practice and important to changing lives and reducing recidivism.

Multi-disciplinary team meetings will coordinate these transitions. Emergency support and benefits enrollment will address immediate and pressing physical needs. Employment services, health care, mental health and substance use treatment, housing, family reunification, cognitive therapies and education will address the root causes and triggers of criminal behavior. Delivered and monitored in a unified system, they provide a strong foundation upon which county residents returning from incarceration can rebuild their lives. Staff from the San Mateo County Health System's Behavioral Health and Recovery Services Division is currently working with the California Department of Corrections and Rehabilitation to provide the same services mentioned to those on parole.

From June 2014 to July 2015, 77% of the realignment population have successfully completed probation; 66% who participated in the county's 550!Jobs training and employment program have secured employment; 43% have received comprehensive medical visits/assessments through the Mobile Health Clinic and 56% have completed AOD treatment programs. The annual average percentage of in custody AB 109 population is 18%. The top crime categories for the newly sentenced 1170 (h) population are: 41% (drug & alcohol), 54% (property), 3% (crimes against persons) and 2% (other).
## Santa Barbara County

### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Enhance public safety by reducing recidivism</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>• Focus funding on and delivery of evidence-based programming that is data driven and matched to offender risk and needs</td>
</tr>
<tr>
<td></td>
<td>• Expand the use of best practices for evidence-based sentencing and adjudication that utilizes offender-specific risk, needs and responsivity measures</td>
</tr>
<tr>
<td></td>
<td>• Support professional training to advance system-wide knowledge of evidence-based practices in the criminal justice field</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Enhance the use of alternative detention (pre- and post-sentence) for appropriate offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>• Expand the use of evidence-based assessment tools for pre-trial and post-sentence jail release decisions</td>
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</table>

### FY 2015-16

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Enhance public safety by reducing recidivism</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>• Focus funding on and delivery of evidence-based programming that is data driven and matched to offender risk and needs</td>
</tr>
<tr>
<td></td>
<td>• Expand the use of best practices for evidence-based sentencing and adjudication that utilizes offender-specific risk, needs and responsivity measures</td>
</tr>
<tr>
<td></td>
<td>• Support professional training to advance system-wide knowledge of evidence-based practices in the criminal justice field</td>
</tr>
</tbody>
</table>

| Measure: | The results of evidence-based assessments will be incorporated into sentencing reports and revocation petitions for realigned offenders |
| | • Training related to evidence-based practices and/or interventions will be made available to all realignment service providers |
**Goal:** Enhance the use of alternative detention (pre- and post-sentence) for appropriate offenders

**Objective:**
- Expand the use of an evidence-based assessment tool for pre-trial and post-sentence jail release decisions
- Strive to maximize jail capacity by appropriately identifying offenders who can safely be released and those who should be held in physical custody

**Measure:**
- Ensure evidence-based risk assessment information is available for at least 90% of inmates in the county jail
- Continue efforts to pilot a pre-trial services assessment and provide the results to the court as early in the court process as possible

**Goal:** Provide for successful re-entry of offenders back into the community

**Objective:**
- Provide services and treatment to offenders in partnership with existing community providers
- Facilitate access to sober living and transitional housing as well as long-term housing
- Strive to support the specialized needs of offenders to improve their successful re-entry into the community

**Measure:**
- Provide gender specific, trauma informed treatment interventions to realigned offenders
- Increase participation in cognitive behavioral treatment such as Reasoning & Rehabilitation (R&R), Thinking for a Change and Moral Reconciliation Therapy™ (MRT™) for realigned offenders to at least 75%
- Provide access to psychiatric services through AB 109 Clinic for post-sentence supervision (PSS) offenders

### FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
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<tbody>
<tr>
<td>Guadalupe Police Department</td>
<td>$5,000</td>
<td>$5,000</td>
</tr>
<tr>
<td>District Attorney</td>
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<td>$256,729</td>
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<tr>
<td>Alcohol, Drug and Mental Health Services</td>
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<td>Public Defender</td>
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<td>Auditor-Controller's Office</td>
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<td>Sheriff's Department</td>
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<tr>
<td>Probation Department</td>
<td>$258,393</td>
<td>$3,919,168</td>
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</table>

Reserved for Services in Future Fiscal Year: $2,853,027

Fiscal Year FY 2015-16 - $10,875,726  FY 2014-15 - $8,878,053
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- **Legal Office Professional**: FY 2015-16 - $16,030
- **Contract Discharge Planner**: FY 2015-16 - $80,005
- **Reserved for Future FY**: FY 2015-16 - $2,853,027
- **Community Release Specialist**: FY 2015-16 - $91,180, FY 2014-15 - $146,265
- **Collaborative Courts**: FY 2015-16 - $234,029, FY 2014-15 - $212,040
- **Social Workers**: FY 2015-16 - $204,494, FY 2014-15 - $176,700
- **Community Supervision & Case Management**: FY 2015-16 - $2,292,269
- **Detention Alternatives**: FY 2015-16 - $850,983, FY 2014-15 - $767,083
- **Victim Services**: FY 2015-16 - $49,504, FY 2014-15 - $37,212
- **Jail Custody**: FY 2015-16 - $1,978,105, FY 2014-15 - $1,943,024

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- **Housing, Sober Living, Detox**: FY 2015-16 - $320,000, FY 2014-15 - $199,106
- **Treatment & Re-Entry Services**: FY 2015-16 - $1,051,292, FY 2014-15 - $558,513

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, Santa Barbara County Probation Department contracts with the University of California, Santa Barbara to assess the implementation and ongoing impact of California’s Public Safety Realignment Act for Santa Barbara County. The evaluation reports are presented to the CCP and the Board of Supervisors (BOS) each year. They are also available to the public via the Probation Department’s website.

Does the county consider evaluation results when funding programs and/or services?

Yes, the evaluation is utilized by the CCP workgroup to review the systems’ impact on criminal offender outcomes and the data is utilized to make adjustments for continuous process improvement. Annually, the evaluation findings are presented to the CCP and the BOS prior to budget planning and discussion. The utilization of the evaluation in this manner allows for the building of capacity through less restrictive options, thereby reducing reliance on incarceration and identifying ways to improve effectiveness of the criminal justice system.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Batterer’s Intervention Program
- Sex Offender Treatment
- Alcohol and Other Drugs (AOD) Treatment Groups
- Detoxification
- Reasoning and Rehabilitation (R&R)
- Seeking Safety
- Moral Reconation Therapy™ (MRT™)
- AB 109 Clinic (AB 109 Offenders’ Mental Health Screening and Treatment Program)
- Recovery-Oriented System of Care (ROSC)
- Secure Continuous Remote Alcohol Monitoring (SCRAM)
- Drop-in Education
- Drop-in Employment
- Employment Readiness
- First Aid and Cardiopulmonary Resuscitation (FA/CPR)
- Work and Gain Economic Self Sufficiency (WAGE$$)
What challenges does your county face in meeting these programming and service needs?

As a system we have needed to be adaptable, nimble and flexible in our collaboration and coordination. Substantial staff turnover both within the county departments and community-based providers have emphasized the importance of communication, relationship building and responsiveness. Challenges have been presented in maintaining regular training opportunities for new staff and in recruitment and retention of qualified staff within our community-based organizations. Additionally, it is recognized that an evidence-based intervention that fulfills the 52-week Batterers Intervention Program requirement is currently not available.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- Introduction and expansion of both gender specific and trauma informed programming and practices.
- Contracting with a local evaluation team has allowed for cohesive and frequent on site collaboration.
- Partnership with Results First Initiative – utilizing a cost-benefit analysis to implement effective strategies.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Santa Barbara County has partnered with the Pew-MacArthur Results First Initiative to identify cost-effective, evidence-based programming and supervision strategies. This partnership allows local stakeholders to utilize a cutting-edge approach to better analyze the “cost-effective” aspect to allocating the limited resources.
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## Santa Clara County

### Goals, Objectives, Outcome Measures and Progress

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal: Decrease the time period from initial referral to enrollment in services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong> Ensure referral and engagement processes and program capacity promotes enrollment in programs/treatment</td>
</tr>
<tr>
<td><strong>Measure:</strong> Decrease the median time from referral to enrollment</td>
</tr>
<tr>
<td><strong>Progress:</strong> Ongoing progress is being realized as a result of behavioral health assessments and services being addressed at the Re-entry Resource Center upon initial release. Where possible, clients are being assessed in-custody prior to release. On June 9, 2015 the Board of Supervisors approved a Board Resolution approving the implementation of individualized re-entry planning policy to improve the time period from initial referral to enrollment in services. A transition plan is an individualized program plan that is designed to ensure the client in custody will receive necessary services in the community post-release. A transition plan will provide linkage to appropriate next step resources based on offenders’ needs, prevent vulnerable populations from becoming homeless, invest in the outcome that every human life has potential to be a productive member of society, and maintain gains achieved during the course of incarceration. The priority population for discharge planning is defined based on objective risk factors such has diagnoses, documented chronic homelessness, documented substance dependency, extensive criminal history and other key factors.</td>
</tr>
</tbody>
</table>
Goal: Improve processes for data collection and evaluation across agencies

Objective: • Ensure accurate data is captured and shared to better serve clients

Measure: • Data is clear, accurate and consistent

Progress: The Referral Tracking System was implemented in mid-July 2015 to provide information regarding service referrals and delivery provided to re-entry clients within Santa Clara County. Currently, each County agency or department provides services to these clients, then stores service and case data in their own departmental systems. There is a need to more clearly understand and see the linkage of the referrals that are made between agencies so that service and outcome data can be effectively measured and assessed. A centralized referral tracking system managed by the Office of Re-entry Services (ORS) will enhance the County’s ability to coordinate services between agencies, more easily measure outcomes, accurately track service delivery and more effectively allocate resources to support the success of re-entry initiatives. This system should alleviate the need for redundant data collection at multiple service points and should save staff from handling manual paper forms at multiple points. We are also implementing a Realignment Business Solution that interfaces with other county data systems to collect, share and report on data for AB 109 clients by January 2016.

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Agency/Department</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Services DEBS</td>
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<td>$811,515</td>
</tr>
<tr>
<td>Department of Alcohol and Drugs</td>
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<td>$1,344,593</td>
</tr>
<tr>
<td>Executive Office/Re-entry Services</td>
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<td>Mental Health and Housing</td>
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<tr>
<td>Facilities and Fleet</td>
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<tr>
<td>Probation</td>
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<td>Pretrial Services</td>
<td>$745,771</td>
<td>$687,498</td>
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<tr>
<td>Criminal Justice: Reserve/Contracts</td>
<td>$6,296,040</td>
<td>$3,984,086</td>
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<tr>
<td>District Attorney</td>
<td>$580,567</td>
<td>$467,010</td>
</tr>
<tr>
<td>Public Defender</td>
<td>$1,098,055</td>
<td>$1,011,226</td>
</tr>
<tr>
<td>Sheriff/Department of Correction</td>
<td>$13,105,055</td>
<td>$13,695,272</td>
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<td>Information Systems Department</td>
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</tr>
<tr>
<td>Employee Services</td>
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</table>

FY 2014-15 Allocation: Fund balance from prior years of $14,693,647.
## FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medi-Cal Eligibility, CalFresh &amp; General Assistance Enrollment</td>
<td>$811,515</td>
<td>$859,813</td>
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<tr>
<td>Behavioral Health Assessment &amp; Case Management</td>
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<td>$1,600,000</td>
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<tr>
<td>Alternative Out-of-Custody Supervision</td>
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<td>$2,000,000</td>
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<td>Electronic Monitoring &amp; Pre-Trial Services</td>
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<td>Revocation Proceedings</td>
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<td>$580,567</td>
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<tr>
<td>Expungement Services &amp; Revocation Proceedings</td>
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<td>$1,098,055</td>
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<tr>
<td>Development of Data &amp; Tracking System</td>
<td>$799,114</td>
<td>$1,130,002</td>
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<tr>
<td>Re-entry Resource Center Operations &amp; Administrative Oversight</td>
<td>$2,112,060</td>
<td>$2,137,548</td>
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</table>

FY 2015-16 - $10,782,453  
FY 2014-15 - $9,323,749
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

Mental Health Treatment (Momentum for Mental Health $758,952, Catholic Charities FSP $150,000, Community Solutions FSP $150,000, Gardner Family Care Corporation FSP $150,000), Housing (Peninsula Health Housing $132,000, HomeFirst Housing $132,000, InnVision Housing $75,000, Abode Housing $100,000) Education (Con-Xion Center for Training & Careers $100,000), Employment (Goodwill of Silicon Valley $500,000, Catholic Charities $300,000), Family Reunification (Gardner Family Care Corporation Family Reunification $100,000) Health & Well-being (Health Right 360 $135,000)

**FY 2015-16:** Substance Abuse Treatment (Family & Children Services Outpatient $837,834, Family & Children Services Day Treatment $535,665, Alcohol & Drug Services Resid. $744,572, Pathway PH Resid. $682,878, Pathway PH (one-time) Resid. $241,010, Pathway - E.H.R. $13,047, Project Ninety Resid. $115,632, Alcohol & Drug Services THU $173,131, Crossroads THU $179,491, Crossroads (180) THU $150,164, Pathway-THU $132,000, Pathway (180) THU $364,869) Faith-based (Breakout Prison Outreach, dba California Youth Outreach $116,667, Bible Way Christian Center $116,667, Bridges of Home $266,667, Maranatha Christian Center $116,667) Mental Health Treatment (Momentum for Mental Health $758,952, Catholic Charities FSP $150,000, Community Solutions FSP $150,000, Gardner Family Care Corporation FSP $150,000), Housing (Peninsula Health Housing $132,000, HomeFirst Housing $132,000, InnVision Housing $75,000, Abode Housing $550,000) Education (Con-Xion Center for Training & Careers $100,000), Employment (Goodwill of Silicon Valley $500,000, Catholic Charities $300,000), Family Reunification (Gardner Family Care Corporation Family Reunification $100,000) Health & Well-being (Health Right 360 $135,000) Legal Services (Bay Area Legal Services $50,000, Pro Bono Project $50,000)
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

On June 25, 2013, the Board of Supervisors approved a 24-month service agreement with Resource Development Associates (RDA) in the amount of $299,310. The contract ended on June 30, 2015. The scope of services included: (1) evaluating and providing written assessment of the county’s AB 109 programs and services; (2) expanding programs and services evaluation to AB 109 funded community agencies; and (3) conducting focus groups with clients and community agencies. To examine the implementation and impact of these efforts, the County of Santa Clara contracted with RDA to conduct a two-year process and outcome evaluation of re-entry services being provided to the AB109 population. This is a comprehensive Public Safety Realignment (AB 109) outcome measurement and process evaluation report covering period from October 1, 2011 to December 31, 2014. The report entails recidivism rate for AB 109 population and impacts on programs and services funded by realignment resources. This process and outcomes evaluation seeks to examine ways in which service provision informs the rates of recidivism among the county’s AB 109 population. The full evaluation report presents findings including AB 109 population characteristics, types of services and programming being accessed, and the impacts of services and programming on recidivism. It also includes an overview of AB 109 clients’, service providers’, and county staff members’ perceptions of the re-entry system. The full report includes a complete account of process and outcome evaluation findings as well as background information, a detailed description of the methodology used and further recommendations.

Does the county consider evaluation results when funding programs and/or services?

Yes, our evaluation results have shown that ensuring clients receive appropriate services based on need helps to reduce their risk of recidivism. We are using assessments to determine program referrals. We evaluate the length between referral and intake, service engagement and completion of programs to determine which programs are more viable and successful at reducing recidivism. We are also using the evaluation to show which services have the greatest impact and use these outcomes to secure more services in this area. We are also using these results to help pinpoint gaps in services and put more resources in areas that are needed.

Does the county use BSCC definitions when collecting data? If so, which?

No.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

21-40%

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Currently, AB 109 funds approximately $2 million towards mental health services in Custody Health’s budget and approximately $4 million towards mental health services in Behavioral Health Services’ system of care, of which $1.3 million is for community-based treatment services.
Mental Health Services for AB 109 clients provided by Custody Health, Health Services provides medical and dental care, nursing and mental health services to inmates being retained locally. The increase in inmate population at the Main Jail and Elmwood as a result of AB 109 resulted in an increase in costs for medical and psychiatric health care services. Custody’s Mental Health Services unit provides an array of mental health services to the inmates incarcerated in the Santa Clara County Jail system, inclusive of mental health exams and treatment, crisis evaluations, acute inpatient services, pharmaceutical management, welfare checks, programs and other services. All inmates booked into custody receive a comprehensive health screening which is inclusive of key questions related to the mental health history of the arrestees as well as information related to their current mental status. All arrestees who have a history of mental illness, who have attempted suicide in the past, and/or who are exhibiting signs of mental illness at booking, are referred to a Mental Health Clinician at booking who conducts a comprehensive mental status examination on the newly booked inmate. As a result of this examination, a plan of care is initiated for the inmate.

Additionally, Custody Health offers a suicide prevention program ensuring that training is provided routinely to staff for the Department of Correction, Office of the Sheriff’s Court staff, Probation, Public Defenders, Custody Medical staff, Mental Health and nursing staff. Custody Health provides Depression Prevention classes to inmates in a number of housing areas at Elmwood Correctional Facility and at Main Jail. These services are critical to assisting clients' return to the community, reducing the length of stay in a locked facility and/or inpatient acute hospital, reducing the costs to the county and better long-term outcomes for the clients. Furthermore, in order to support the clients’ transition into the community, these services provide the client with mental health counseling, including individual and group and linkages to community support services.

Due to the increased census in the County’s correctional facilities and the extended length of stay, the mental health population has dramatically increased. Since the implementation of AB 109, the Board of Supervisors has approved the funding of two additional Psychiatrist positions at the jail to manage the additional mental health patients. Inmates are evaluated by a psychiatrist and provided appropriate care and treatment, which may include prescriptions for psychotropic medications. The psychiatrists assist in evaluating clients for medication management and provide appropriate treatment for the relief of their debilitating symptoms.

Transitioning Client from in-custody to the Re-entry Resource Center (RRC) for assessments and linkages behavioral health services, in collaboration with Probation, Custody Health, Social Services Agency and the ORS established a re-entry model at the RRC that consists of a service assessment and delivery model.

The Behavioral Health team consisting of four licensed clinicians at the RRC provide clinical assessment for client referral, screening and/or linkage for mental health, drug and alcohol treatment needs at the RRC. Clients are linked to treatment providers and other needed services. Behavioral Health provides a minimum of 70-90 critical needs and/or Mental Health and Drug an Alcohol Assessments monthly that includes linkage support every week depending on staffing pattern and client flow. In addition to these four clinicians, there are two Rehabilitation Counselors who do critical needs assessments and refer, and link clients to needed community services. These Rehabilitation Counselors also provide brief and crisis counseling, as well as case management services for those identified as high-risk/AB 109 clients at RRC. Probation and ORS identify these high-risk or high need individuals with priority to AB 109 clients for case management. Clients Receive Immediate Mental Health Services County’s Medical Mobile Unit.

In September of 2013, the RRC, through partnership with the Valley Homeless Healthcare Program (VHHP), opened the RRC Mobile Health Unit to address the medical needs of the clientele. Given the great need for psychiatric services in the re-entry population and the unique ability for VHHP to provide a broad range of services for patients with mental health disorders, a full-time Psychiatrist is part of this team.
This Psychiatrist works under VHHP’s current model of collaboration with medical physicians and splits time between the RRC and the Alexian Homeless clinic. The goal is to provide intake, evaluation and treatment for all AB 109 clientele within one week of presenting to the RRC. The Psychiatrist provides bridge services from custody to society and coordinate outreach for patients with known mental health disorders. VHHP has a wrap-around approach to treating patients and has provided psychiatric services to their patients for many years. In this model, medical doctors and psychiatric doctors work side-by-side to provide psychiatric care to patients. Because of this collaboration, the medical doctors can often manage many of the follow-up appointments after the psychiatrist’s initial evaluation. This allows greater access to psychiatric services as the psychiatrist has fewer routine follow-up appointments and thus is available for more intakes of new patients.

- In the first quarter of 2015 (July 1 through September 30, 2015), the mobile clinic evaluated 117 new patients, 76% of whom were seen in full or part for psychiatric complaints. Prior to having the psychiatrist at the Re-entry Center, about 10% of mental health patients were in crisis and had to be referred for urgent mental health evaluation. Staff plans to review and closely monitor new patients to determine the rate of mental health patients not being referred for urgent medical health evaluation.

- Investments were made in more balanced, community-based treatment programs that employ evidence-based principles. AB 109 funds staffing resources at the Evans Lane program and directed contract services to fund Mental Health full service partnerships and crisis residential services. Evans Lane provides outpatient support in order to help re-entry clients acquire skills to increase self-reliance. The focus of this treatment is to assist clients in developing better coping skills resulting in few hospitalizations and lower rates of recidivism.

- Full Service Partnership (FSP) programs are intensive, comprehensive programs for adults with Serious Mental Illness (SMI) who are high-risk, frequent users of involuntary care and/or under-served homeless consumers with high-levels of need. These programs are based on the AB 2034 philosophy that provide a full array of treatment services which include: substance dependency treatment, psychiatric services, mental health counseling, case management, housing, and community resources necessary to meet the needs of each individual’s life circumstances. These services are operated by community-based organizations and provide client access 24 hours per day, seven days per week. FSP targets SMI adults discharged from Institutes for Mental Disease (IMDs), inpatient hospitals, state hospitals, who have been high users of EPS, crisis residential services, have severe co-occurring disorders, involvement with the criminal justice system and/or are homeless or at risk of homelessness. FSP providers have the flexibility to outreach and engage clients who are homeless or are in a locked setting.

- AB 109 Crisis Residential programs provide 24-hour residential services for consumers experiencing acute psychiatric episodes or crisis. These consumers do not present medical complications requiring nursing care. In addition, crisis residential programs serve current and newly referred Santa Clara County Department of Behavioral Health Services (DBHS) consumers who meet medical necessity criteria. Priority is given to referrals received from Acute Inpatient Hospitals, IMDs and consumers at-risk of hospitalization.

- In order to understand the service utilization patterns of AB 109 clients in the County of Santa Clara, the ORS examined the percentage of individuals participating in each type of service and found that less than half of AB 109 clients accessed any type of service after release during the period of October 1, 2011 through December 31, 2014. Of all services, Substance Use Treatment Services (SUTS) were the most commonly used at 40%, and the smallest proportion of the AB 109 population participated in mental health services at 6%. Staff continues to improve efforts to ensure that referrals and linkages of AB 109 clients are closely tracked and monitored.
SUTS provides drug and alcohol abuse treatment services for AB 109 clients. Services provided include detoxification services, residential treatment, outpatient services, dual-diagnosis treatment, methadone/drug replacement therapy and transitional housing assistance.

*What challenges does your county face in meeting these programming and service needs?*

One of the challenges the county faces is providing evidence-based programming in-custody and meeting the needs of AB 109 clients and re-entry clients in custody. On September 29, 2015 the Board of Supervisors approved an allocation of $1,850,000 from the Public Safety Realignment AB 109 Trust Fund to cover the cost of expanded in-reach services for FY 2016 through FY 2018 ($1,800,000 for contract services and $50,000 for inmate supplies and equipment to support these services). The Department of Correction and Adult Probation Department will identify and refer individuals for in-custody re-entry services and programming. The target population for services will focus on minimum and medium inmates identified by Rehabilitation Officers. In the minimum housing classification, the target is a minimum of 60 females and 240 males annually. In the medium housing classification, the target is a minimum of 60 females and 800 males to participate in services annually. On October 1, 2015 the ORS released a competitive bidding through a Request For Proposals (RFP) to identify qualified service providers who specialize in one of the areas listed below. The RFP closed on October 30, 2015 and an evaluation committee has been formed to review the proposals. Notification of the awarded providers will occur late November 2015 with services beginning on January 1, 2016. Services will focus on:

- Psycho-education classes concentrating on drug or alcohol coping skills and cognitive behavioral therapy;
- Job readiness and employment development training / Life Skills;
- Family violence prevention and parenting classes based on an evidence-based model, Triple P (Positive Parenting Program); and
- Education and Certificated Programs

Staff from the Department of Correction’s Program Unit and the ORS will review the specific programming resulting from this RFP and determine what services were not proposed and which services should be increased. With the adoption of the Public Safety Action Plan and the creation of the Blue Ribbon Commission on Improving Custody Operations, there is an opportunity to add substance abuse and mental health related programming offered by county staff and/or community-based organizations. AB 109 and re-entry stakeholders plan to return to the Board at a later date with a request for staffing and service expansion.

*What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?*

The Adult Re-entry Strategic Plan and the Community Corrections Plan objectives highlight the development of re-entry transition/discharge plans for clients. At the April 15, 2015 Public Safety and Justice Committee meeting, the Committee received a report relating to the current and future transition and discharge efforts and directed the Administration to prepare a Board Resolution reflecting the principles of a Transition and Discharge Planning Policy for Offenders. On June 9, 2015 the Board of Supervisors approved a Board Resolution approving the implementation of individualized re-entry planning policy.
A transition plan is an individualized program plan which is designed to ensure the client in custody will receive necessary services in the community post-release. A transition plan will:

- Provide linkage to appropriate next step resources based on offenders’ needs;
- Prevent vulnerable populations from becoming homeless;
- Invest in the outcome that every human life has potential to be productive members of society; and
- Maintain gains achieved during the course of incarceration.

The priority population for discharge planning is defined based on objective risk-factors such as diagnoses, documented chronic homelessness, documented substance dependency, extensive criminal history and other factors.

Below is a status as of the first quarter for fiscal year 2015 (July 1 - September 30, 2015): Agency Implementation Plan Target Population Update as of 9/30/15

- Department of Corrections expand to entire regimented corrections program (RCP) II population as an increase to RCP II capacity.
- Alternative Supervision Clients and limited high-risk to re-offend inmates.
- Rehab Officers submitted 58 transitions plan to the ORS to begin the linkages to potential support services such as housing and employment. Rehab Officers continue to improve the process with Custody Health to identify medication and medical needs of the clients being discharged.
- Custody Health target specific high-user population for mobile clinic and service linkage high-need/user patients who require medical follow-up. A nurse practitioner sent 44 referrals to the Medical Mobile Unit at the RRC to inform them of future clients. ORS updated the transition plan form to meet the needs of Custody Health staff to formalize the transition plan with MMU and ORS.
- Probation conducted a full CAIS risk assessment (moderate and high score will receive a full CAIS risk assessment) and will generate a case plan from the CAIS risk assessment.
- Mandatory Supervision Clients, A total of 14 in-custody clients (1170MS), received a full CAIS assessment by a Probation Officer and subsequently referred the client to the Behavioral Health Team at the RRC for follow-up.
- The ORS is now tracking these referrals made to Behavioral Health and will provide additional information at the next quarterly update.
- AB 109 and Re-entry stakeholders continue to meet regularly to discuss the challenges and opportunities to effectively transition clients from jail to the community. One challenge is the increasing workload on staff to coordinate these services, what case management model will best serve the needs of the clients and review the housing needs of clients upon release. The ORS and its stakeholders plan to return to the Board at a later date with a request for staffing and service expansion.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In late 2011, the Santa Clara County Behavioral Health Services Department (SCCBHSD) began the implementation of its Mental Health Services Act (MHSA) funded Innovation 06 project to create an inter-faith re-entry collaborative and Faith-Based Resource Centers (FBRCs) to facilitate service coordination to individuals re-entering the community from jail or prison. The Faith-Based Collaborative was the main organizing body of Innovation 06, which consisted of a diverse group of faith leaders, county staff from multiple departments (e.g. SCCBHSD, the Department of Alcohol and Drugs, Probation, etc.), consumers, family members of consumers and other stakeholders. Its primary purpose is to serve people that have left jail or prison and are returning to the Santa Clara
Community. According to a January 2015 evaluation report developed by Resource Development Associates (RDA), some key findings included that 38% of individuals self-reported being homeless or living in a shelter, 25% live in transitional housing upon intake, 11% indicated they were renting or in stable housing and 26% reported living with friends or family; 84% of the participants are on probation, parole, both probation and parole or community supervision (AB 109); and the majority of participants were single parents. Currently, MHSA provides $1.2 million and AB 109 provides $700,000 in funding annually to support four centers and program staff.

While participants sought out a range of services, their primary needs were transportation/mobility and housing assistance. The RDA report indicated that some areas that the FBRCs were not able to adequately address included legal assistance, income assistance, health care coverage and mental health services. However, the RDA evaluation demonstrated many benefits from this innovative model for engaging criminal justice involved individuals re-entering the community. As such, it has been determined to sustain this program as part of the MHSA Community Services and Support (CSS) component.

**What were the needs and services sought by the re-entry population?**

- FBRC participants came to the resource centers seeking support in material resources as well as spiritual connection. While participants sought out a range of services, their primary needs were transportation/mobility and housing assistance. FBRC staff members’ comments support this finding, indicating that once they had resources available to address transportation and housing, they felt better equipped to meet the participants’ needs.

**What services and supports did the re-entry population receive at the FBRCs?**

- FBRCs are able to meet the top priority felt needs of FBRC participants such as transportation, self-care items, food, housing, and employment. FBRC participants are receiving the services they are requesting. The top five services FBRCs provided were: 1) mobility/transportation, 2) self-care, 3) food, 4) housing and 5) employment. Both FBRC participants and staff strongly commended the Flex-Fund program to facilitate immediate sufficiency in acquiring resources to meet their basic needs.
- Services FBRCs were not able to as adequately address directly included legal assistance, income assistance, healthcare coverage and mental health treatment. In these domains, participants were referred to outside agencies. FBRC staff reported a particular challenge in working with participants with mental health issues, citing non-compliance with medication and lack of training on how to support FBRC participants with more serious mental health issues as particularly difficult.
- FBRC participants are receiving spiritual and social support, which in combination with getting their immediate needs met, made for a successful experiencing returning to the community. For FBRC participants, having the spiritual connection and support played just as important a role as material support. Many participants cited it was the combination of both their felt needs and spiritual guidance that makes this re-entry program particularly successful.

**Did the resources and supports contribute to successful re-entry?**

- FBRC participants’ overall self-sufficiency significantly improved over the course of their engagement with the project. The overall average SSM score across all domains increased from 2.73 to 3.43 out of a possible 5, a significant improvement of .70 points on the SSM scale. Specific domains where FBRC participants improved by one point or more included employment (1.80), mobility/transportation (1.54), self-care (1.26), child care (1.19), health care coverage (1.15), spiritual connectedness (1.13) and income (1.04). All of these gains were statistically significant as well.
• FBRCs provided some services and supports that contributed more significantly to increased self-sufficiency than others. Self-sufficiency in the domains of physical health, legal aid/support, substance abuse and adult education did not see statistically significant gains for FBRC participants.

• The FBRC model may not be the most appropriate setting to receive re-entry services and supports for people with more serious substance abuse and mental health issues. FBRC participants with significantly lower self-sufficiency scores in substance abuse drop-out of the project more quickly than other participants. In addition, although the average self-sufficiency score for mental health increased significantly over the course of the participants’ engagement, the baseline self-sufficiency score for mental health was already 4.07 out of 5. Some FBRC staff indicated that they felt unprepared for how to support someone with more serious mental illness at their resource center, especially for those who are noncompliant with their mental health treatment plan.

• For some FBRC participants, their length of engagement is commensurate with their need for services and supports. FBRC participants with greater need, as indicated by their socio-demographics, engaged with the FBRCs for a longer duration than their counterparts with less need. However, the subpopulation of FBRC participants who drop-out before their second SSM administration are on average younger (less than 45 years old) and more White/Caucasian than the majority of FBRC participants who stay engaged beyond three months in the project.

• The Innovation 06 model contributes to a successful re-entry experience because FBRCs quickly address both the spiritual and material needs of individuals as soon as re-entry begins. FBRCs are prepared to meet participants out in the community or directly upon release from prison or jail via a warm handoff. Upon the participant’s first visit they are provided an UPLIFT transportation pass that allows for three months of free county-operated public transit, a food basket and hotel voucher until more stable arrangements can be made. This is made possible by the extensive resources the Mental Health Department has helped to secure for FBRCs in flex-funds, vouchers and other support.

• FBRC stakeholders suggest that successful re-entry outcomes are due, in part, to a case management approach that centers on the creation of authentic human and/or spiritual connections. These connections are facilitated by having FBRC staff with lived experience of the criminal justice system who partner with participants to conduct case management and spiritual counseling.
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## Santa Cruz County

### Goals, Objectives, Outcome Measures and Progress

#### FY 2014-15

**Goal:** Establish an array of effective alternatives to incarceration to address the impacts that the realigned population will have on the county jail in order to avert crowding and poor conditions of confinement without jeopardizing public safety outcomes.

**Objective:**
- Implement a Custody Alternatives Program (CAP) to screen and divert appropriate post-sentenced inmates in order to maintain an average daily jail population at or below 100% of the rated capacity of the facility.
- 90% of individuals on electronic monitoring (EMP) will remain free of re-arrest while serving their sentence in the community.
- 90% of individuals on CAP will be assessed and referred for services while serving their sentence in the community.

**Measure:**
- Number of days/months during which jail facilities are at or below rated capacity.
- Number and percent of EMP inmates with no re-arrest while serving their sentence in the community.
- Number and percent of CAP participants assessed and referred for services while serving their sentence in the community.

**Goal:** Implement evidence-based probation supervision that properly assesses risk factors associated with recidivism and provides effective probation interviewing, case planning and community supervision to ensure public safety and reduce recidivism.

**Objective:**
- 100% of AB 109 individuals will be assessed for risk level, and moderate- and high-risk individuals will be assessed for criminogenic needs.
- 100% of probation caseloads, contact standards and violation responses will be based on offender risk level.
- Number and percent of completed assessments, as measured by regular caseload review.

**Measure:**
- Number and percent of completed assessments, as measured by regular caseload review.
- Number and percent of cases meeting contact standards and response grid, as measured by regular caseload review.
- Number and percent of probation contacts using effective practices in community supervision (EPICS) interventions, as measured by regular caseload review.
Goal: Develop community partnerships for effective intervention services that adhere to the principles of evidence-based practices for maximum recidivism reduction

Objective:
- 100% of AB 109 individuals will have individualized case management and service referral plans based on assessed risk level and criminogenic need
- 75% of AB 109 individuals will complete a minimum aggregate number of service hours during the period of supervision, based on risk level
- 75% of individuals referred for services addressing criminogenic need will demonstrate pre/post improvement in outcomes related to that service area

Measure:
- Number and percent of AB 109 individuals assessed and referred for services to address criminogenic needs
- Number and percent of AB 109 individuals completing benchmark levels of service (100 hours for moderate risk, 200 hours for high-risk)
- Number and percent of individuals demonstrating improved area-specific outcomes following the completion of services

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

**Community Supervision (Probation Department)**
- FY 2015-16: $2,020,348
- FY 2014-15: $2,299,254

**Corrections (Sheriff's Department)**
- FY 2015-16: $2,020,348
- FY 2014-15: $2,299,254

**Administration (Probation Department)**
- FY 2015-16: $200,000
- FY 2014-15: $200,000

FY 2014-15 Allocation: Total allocation of $6,261,044
FY 2015-16 Allocation: Total allocation of $7,097,763

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

**Sheriff- Custody Alternatives Program/GPS Monitoring and jail programming**
- FY 2015-16: $2,020,348
- FY 2014-15: $2,299,254

**Probation - T4C Curriculum, Effective Practices For Correctional Supervision**
- FY 2015-16: $2,020,348
- FY 2014-15: $2,299,254

**Health Services Agency- Clinical Alcohol and Drug Assessment and Referral; Mental Health Nursing**
- FY 2015-16: $121,235
- FY 2014-15: $121,235

FY 2015-16 - $4,719,743
FY 2014-15 - $4,161,931
FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- **Cabrillo College**: $50,000
- **Watsonville Law Center**: $9,000
- **Watsonville Aptos Adult Education**: $60,868
- **Volunteer Center of Santa Cruz County**: $370,000
- **Walnut Avenue Womens Center**: $5,000
- **United Way of Santa Cruz County**: $79,105
- **Sobriety Works, Inc.**: $224,500
- **Conflict Resolution Center**: $8,000
- **Santa Cruz Barrios Unidos**: $100,800
- **Santa Cruz Adult School**: $56,000
- **Pajaro Valley Shelter Services**: $1,500
- **New Life Community Services**: $38,500
- **Janus of Santa Cruz**: $264,155
- **Homeless Service Center**: $74,250
- **Encompass Community Services**: $623,900
- **Community Options**: $1,888
- **Community Action Board**: $201,792

FY 2015-16 - $7,097,763
FY 2014-15 - $4,161,931
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, evaluation includes two levels, program outcomes and collective impact. Each service provider is required to provide weekly rosters and quarterly reports that include all pre/post data, milestones achieved and program-specific outcomes related to assessed criminogenic need. Working with the Center for Advancing Correctional Excellence at George Mason University, the CCP has implemented the Risk Needs Responsivity Simulation Tool. The program assessment component of this tool includes self-assessment accompanied by site observation/validation that results in numeric scoring of multiple elements of program implementation. All providers complete program improvement plans and participate in additional training and technical assistance to achieve measurable gains in annual reassessments. At the level of collective impact, Probation staff track criminal justice outcomes (re-arrest, violation, re-conviction) at one, two and three years. This information is disaggregated by demographic characteristic, crime level and type, and by service dosage and program outcomes. For example, between 2011 and 2014, individuals who received adequate dosage (>100 hours for moderate risk, >200 for high-risk) showed a felony recidivism rate 19% lower than those who did not receive adequate dosage. In addition, the CCP has released a request for proposals for external evaluation of the Santa Cruz County AB 109 implementation, including all three elements of corrections, community supervision and treatment and intervention services. This 18-month evaluation is expected to provide clear data regarding the effectiveness of the overall model as well as specific strategies and programs. It will also establish an ongoing data collection, analysis and reporting structure that will continue into the future.

Does the county consider evaluation results when funding programs and/or services?

Yes, the Risk Needs Responsivity Simulation Tool (GMU) combines an analysis of individual risk and needs assessment information from multiple years of County data with the findings of the provider assessment in order to provide a jurisdictional analysis of service gaps and duplication. During 2014-15 the most striking gap was in programs targeting criminal thinking, behaviors and identity (CTBI), where programs were available for less than a third of the individuals for whom CTBI was a key driver of criminal behavior. As a result, the 2015-16 and 2016-17 funding has been reconfigured to triple funds for CTBI curriculum in the jail and in the community. Starting in FY 2016-17 all AB 109 contracts will include benchmark outcomes that will be required for continued funding.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction and length of stay.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%. Locally, the AB 109 allocation is allocated evenly between corrections, community supervision and treatment and intervention services. Evidence-based practices include all of the funding for contracted treatment and intervention services, which are required to be evidence-based programming. It also encompasses nearly all of the AB 109 funding for community supervision, which supports evidence-based practices including risk and needs assessment, effective practices in community supervision (EPICS), Motivational Interviewing and Thinking For a Change. It also represents the majority of AB 109 corrections funding, which supports a robust Custody Alternatives Program and Electronic Monitoring Program to provide alternatives to incarceration for appropriate individuals.
We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The Probation Department conducts risk and needs assessment, and develops individualized treatment plans and makes referrals to address the key drivers of criminal behavior. Services are organized by criminogenic needs/responsivity issue, as follows:

- **Criminal Thinking, Behavior and Identity:** Evidence-based curricula, offered in group and individual settings, including Thinking for a Change, Courage To Change (workbooks), Seeking Safety and Getting Motivated To Change. Services provided by the Volunteer Center and Santa Cruz Adult School is partnership with Probation officers.
- **Antisocial Peers:** Pro-social peer mentoring and leadership development, including Barrios Unidos and the AB 109 Speakers Bureau provided by the United Way.
- **Family Conflict:** Parent education and family involvement, including the Papas Fatherhood Involvement Program, provided by Encompass, and Celebrating Families, provided by Janus of Santa Cruz.
- **Low Educational Attainment:** Academic testing, GED preparation, Adult Basic Education, low-level literacy, postsecondary education, provided by a linked network of the Volunteer Center, the Santa Cruz Adult School, Watsonville Aptos Adult Education and Cabrillo College.
- **Low Vocational Attainment:** Employment readiness workshops, individual job placement services, and employer education and outreach, provided by the Community Action Board and United Way.
- **Unstable/unsafe Housing:** Emergency and transitional housing provided by the Homeless Service Center, Pajaro Valley Shelter Services and the Encompass River Street Shelter.
- **Substance Use Disorders:** Assessment, detox, outpatient, intensive outpatient, residential, medically-assisted treatment and sober living environments, provided by Encompass, Janus of Santa Cruz, Sobriety Works and New Life Community Services.
- **Mental Health Disorders:** Assessment, counseling and system navigation, medication management, and daily work crew activities provided by Encompass, Health Services Agency and Community Action Board.
- **Re-entry Planning and Support:** Benefits assistance and enrollment, driver's license reinstatement, records clearance and comprehensive re-entry planning provided by the Volunteer Center and the Watsonville Law Center.

What challenges does your county face in meeting these programming and service needs?

- **Maintaining communication, coordination of services and common goals and language across multiple domains and a dozen service providers.** Probation staffs a monthly provider network meeting to assist in identifying and resolving problems, conducting cross-training and meeting as a group with the Probation AB 109 unit to maintain functional referral pathways.
- **Staff turnover in all agencies.** This creates a need for ongoing training and resources for staff who bring their individual area of expertise without the necessary background in evidence-based practice for community corrections.
- **Data integration with courts, corrections and probation.** The data needed to accurately track recidivism and other criminal justice outcomes is spread between these three domains, each with its own vendor-based electronic information system. The CCP has been supporting a multi-agency effort to build common identifiers and systems to automate the transfer of key data points between the three systems. In October 2015 the local Superior Court initiated a new data management system, and the technical details of integration with this system have been considerable. Santa Cruz County is now working with three other counties that utilize the same Probation and Court systems, and this consortium has begun work with the system vendors to develop data integration.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Based on needs and service data, the CCP has dramatically expanded funding for Cognitive Behavioral Interventions targeting criminal thinking, behaviors and identity. The CCP has increased the scope and scale of mental health services, including group and individual counseling, and system navigation services. This reflects the need identified during the first two years of AB 109 implementation for mental health services to individuals with mental health issues that impair their ability to engage and benefit from services targeting criminogenic needs, but that are not serious enough to warrant services through the County’s System of Care.

Santa Cruz County continues to partner with the Pew-MacArthur Results First Initiative in order to maintain a priority on programs and strategies that are proven effective and which result in a positive benefit/cost ratio. The Results First economic modeling tool, now in its second generation, is being used to inform the selection and funding of programs to address recidivism.

In order to enhance outcomes for substance use disorder (SUD) treatment, the CCP has developed a pilot Recovery Maintenance Program. This program changes the nature of SUD treatment from an episodic, acute-response model to one of ongoing support for a chronic health condition. The program includes expanded assessment, engagement and discharge planning, “telehealth” continued communication for up to a year following discharge, ongoing assessment and rapid/priority return to treatment as needed in response to relapse triggers. The program is expected to shift the culture of SUD treatment and the expectations of staff and clients, resulting in better long-term outcomes and reduced criminal recidivism.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Community Action Board has provided employment readiness workshops and individual sessions from the start of AB 109 implementation. These have been in-custody as well as in the community. Starting in FY 2014-15 the program expanded to focus on individual job placement and retention. In its pilot phase, a total of 16 out of 22 AB 109 individuals were placed in full- or part-time jobs and all had retained employment for at least six months. The program has now been joined by a community-wide employer education program provided by the United Way that aims to increase the number of employers willing to hire formerly incarcerated individuals. The Workforce Investment Board and multiple local business organizations have joined as partners to disseminate information and identify potential businesses for target outreach.

A partnership between Probation, Corrections, the County Health Services Agency, the jail medical services provider and Janus of Santa Cruz has been implementing a pilot program to utilize Vivitrol® (a sustained-release, injection form of Naltrexone) to assist opioid-abusing offenders to engage and succeed in SUD treatment. The program identifies appropriate individuals while in custody and, following medical assessment and informed consent, provides the first injection one to two days prior to release in order to reduce the risk of return to drug-using behavior. A number of participants have reported that Vivitrol® reduces their craving and allows them to enter treatment programs and break long-standing chronic relapse patterns. The pilot is still being assessed to determine the characteristics of individuals most likely to benefit from participation along with developing the referral and case management protocols needed to support success.
Shasta County

Goals, Objectives, Outcome Measures and Progress
FY 2014-15

Goal: Increase the number of offenders enrolled in health care benefits

Objective:
- Implement a plan to have a healthcare enrollment staff provide services in the county jail
- The eligibility worker at the Probation Department will enroll all newly supervised offenders in healthcare benefits
- Implement a plan to have an eligibility worker enroll existing offenders under supervision at the Adult Probation office

Progress: Within the jail, staff from Social Services are available to provide application assistance to offenders who are part of the Behavioral Health Court or will be admitted to the hospital. Within the Community Corrections Center, an eligibility worker is stationed to assist with applications for any offenders on supervision.

Goal: Increase the number of offenders assisted in obtaining and maintaining safe and appropriate housing

Objective:
- Contract with a community-based organization to develop and execute a housing program
- Provide workshops on independent living skills, budgeting and assist in increasing offender confidence
- Provide rent subsidies and loans for eligible clients

Progress: This goal was a continuing goal from FY 2013-14. The contract and initial program implementation for this program happened in previous fiscal years. This program encountered some roadblocks during the middle of FY 2013-14 and the program was evaluated by Probation. Following this implementation, enrollment, referrals, workshops and offenders housed increased significantly. Offenders housed successfully in FY 2014-15 increased by more than 200% from the prior year. The total workshops held increased from 121 (in FY 2013-14) to 183. In addition, referrals to this program increased by more than 50%.
**Goal:** Increase the number of offenders who graduate from the Day Reporting Center (DRC) programs

**Objective:**
- Work with Probation staff to educate them on appropriate candidates for the DRC
- Increase enrollment in the DRC
- Decrease offenders absconding from the DRC

**Measure:**
- By June 2015 increase total number of participants successfully completing and graduating the program by 7 offenders

**Progress:** Probation Administration staff and staff from the DRC spent a considerable amount of time working with Probation Officers to education them on the programs offered at the DRC and which types of offenders would be appropriate. As a result, the total referrals for the year to the DRC increased by nearly 70% (from FY 2013-14). The average monthly referrals increased from 11 (in FY 2013-14) to 18. The average number of offenders enrolled monthly increased from 48 (in FY 2013-14) to 65. Staff from Probation and the DRC began to institute new procedures to reduce the number of absconds. The DRC reports to probation daily on absconds so case carrying officers are aware. Officers contact them and often pick them up and transport them to the DRC. If the offender continues to abscond, one of the department Field Training Officers contacts them in the field or a referral is made to the Compliance Team. Successful completion of the DRC programs has increased significantly. In FY 2013-14 7 offenders graduated. In FY 2014-15 this number increased by 25 offenders to 32. The expectation is that these numbers will continue to increase as the total enrollment has increased as well as additional efforts from Probation and the DRC to reduce absconds.

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**Goals, Objectives, Outcome Measures and Progress FY 2015-16**

**Goal:** Increase the number of offenders serviced by Pre-Arraignment Supervised Own Recognizance Program (PSOR) and Supervised Own Recognizance (SOR)

**Objective:**
- Evaluate bookings in the county jail to expand the type of offenders who are eligible
- Solicit stakeholder feedback to improve the program
- Continue to educate justice partners about program and level of supervision received by offenders

**Measure:**
- Increase the number of offenders who successfully complete and are sentenced

**Goal:** Implement community resource program for offenders being released from custody (jail or prison)

**Objective:**
- Determine resources available in the community to provide services to offenders
- Arrange time and location on a monthly basis
- Provide offenders with information about treatment services appropriate to their top criminogenic needs

**Measure:**
- Each newly released offender will have at least 1 treatment referral
Responses to Optional Survey Questions

Does your county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The county evaluates the effectiveness of many of the programs/services funded with it’s Public Safety Realignment allocation. Contracted providers provide monthly updates about attendance and completion of the program. At a minimum of annually, Probation staff review recidivism (as measured by new arrests and convictions) of the offenders participating in these contracted programs. The Day Reporting Center, in conjunction with the CCP and the Probation Department, establishes annual goals and reports on the progress for these goals at least quarterly.

Does your county consider evaluation results when funding programs and/or services?

The evaluation of programs is new to Shasta County. The contractor performance and, when available, the outcomes for the offenders are considered when renewing contracts. It is the goal to move toward a better evaluation process for all contractors as well as internally funded programs.

Does your county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

20% or less. These services include the Day Reporting Center, Moral Reconciliation Therapy™, and Thinking for a Change. In addition, Probation Officers use an evidence-based risk/needs assessment tool and motivational interviewing when working with offenders. Beginning FY 2015-16 Probation Officers began using the Alcohol and Drug Assessment Tool from Dr. Latessa.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

We currently offer a Day Reporting Center, inpatient and outpatient alcohol and drug treatment, sober living, Thinking for a Change, Moral Reconciliation Therapy™, Parenting Counseling, Domestic Violence Treatment, Behavioral Health Collaborative Court, Re-Entry Collaborative Court and Mental Health and Alcohol and Drug assessments at the Community Corrections Center.

What challenges does your county face in meeting these programming and service needs?

We've continued to experience some challenges in getting officers to submit referrals to the contracted programs that address the offender's top criminogenic needs. Often officers automatically make referrals to alcohol and drug programs when an offender indicates a dependency on one of these substances or has previous criminal drug offenses. In many cases, the top criminogenic needs of the offenders are in different areas. Efforts to educate the officers on the available programs and purpose of addressing the top needs first has helped. We anticipate continued reinforcement of these principles will continue to make a difference.
Offender attendance and engagement in programming and services is another significant challenge. This challenge is difficult to address as some offenders are simply not ready to change. Efforts have been made to regularly communicate with the providers to determine attendance or engagement issues early. When these issues are identified, Probation Officers work more closely with the offenders to assist.

Evidence-based programming that specifically addresses the top criminogenic needs is of prime importance. For some of these criminogenic needs, there are not currently agencies in Shasta County that are certified to provide these services. In addition, many of the programs currently available in the county are not evidence-based.

The Supervised Own Recognizance (SOR) and Pre-Trial Supervised Own Recognizance (PSOR) programs experience challenges related to eligibility for the program. Offenders often have multiple Failure to Appears which make them ineligible.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Shasta County plans to implement a resource program for offenders in FY 2015-16. This program will be a one step resource fair for offenders newly released from custody on supervision (probation or parole). Attendance will be mandatory and offenders will be required to get at least one referral to a program that addresses one of their top criminogenic needs.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

- The Day Reporting Center (DRC) had 41 offenders (including 7 from a prior fiscal year) complete the program. Out of these offenders 4 have re-engaged in the criminal justice system post-completion with 1 being remanded back to state prison.
- The SOR Program supervised 233 offenders in FY 2014-15, an increase from the prior year of 49 offenders. Of these, 81.5% were successful in making it to sentencing. An expansion of this program to include offenders pre-trial was implemented during the end of the fiscal year and the days of operation were expanded to include weekend days.
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Sierra County

Goals, Objectives, Outcome Measures and Progress
FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Improve probation services and supervision programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>• Continue electronic monitoring (EM) program  &lt;br&gt; • Continue day reporting center</td>
</tr>
<tr>
<td>Measure</td>
<td>• Electronic monitoring up and running  &lt;br&gt; • Day Reporting Center up and running</td>
</tr>
</tbody>
</table>

Goal: Provide funding to sheriff’s office

Objective: • Fund two sheriff’s deputies and associated equipment  <br> • Funding for housing for felons out of county (county jail closed)

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- **Sheriff**: $300,000<br>$132,000
- **Probation**: $33,000<br>$46,830
- **Other**: $8,000

The CCP meets as needed, usually 3 to 6 times a year.
The county reported no allocations in FY 2015-16 to non-public agencies for programs and services.
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

No.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

The county declined to respond to this question.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

County mental health and drug/alcohol treatment mostly.

What challenges does your county face in meeting these programming and service needs?

Very small, limited population, very few services other than those provided by county.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

- Our Electronic Monitoring program is working pretty well. 18 uses for over 935 days - no crimes committed while on electronic monitoring.
- The Drug Court has about an 80% graduation rate.
# Siskiyou County

## Goals, Objectives, Outcome Measures and Progress

### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Measure</th>
<th>Progress</th>
</tr>
</thead>
</table>
| Reduce jail overcrowding while maintaining community safety and improving criminal justice outcomes | A. Use pre-trial risk assessment tools  
B. Increase use of alternative sentencing options  
C. Implement a pre-charge, pre-filing diversion program | A. Begin a pre-trial supervision program by April 1, 2015  
B. Maintain use of alternative sentencing options  
C. Expand service resources available to divertees | A. Achieved; B. Achieved; C. In Progress |

| Goal: Increased capacity to implement recognized best practices | Objective: A. Probation caseloads are reduced to 50:1  
B. Enhanced use of evidence-based screening and case management tools  
C. Consistent use of graduated sanctions for reoffending probationers | Measure: A. By June 30, 2015, identify strategies for the most effective staffing structure  
B. Case plans will be conducted on certain risk levels to determine protective and risk factors  
C. Adopt a formalized matrix for using graduated sanctions by June 30, 2015 | Progress: A. Caseloads are 50-60:1; B. In process; C. A formalized matrix has not yet been adopted |

| Goal: Increased access to evidence-informed services and supports known to reduce recidivism | Objective: A. Structured intervention and treatment programs provided at the Day Reporting Center  
B. Increased evidence-based programming (EBP) training inclusive of judges, probation officers, prosecutors, defense attorneys and law enforcement  
C. Enhanced community-based programming for the criminal justice-involved, low-risk and at-risk populations | Measure: A. By June 30, 2015, define a process to evaluate program effectiveness  
B. By April 1, 2015, implement a process of agendizing reports to the CCP following funded training attendance  
C. By June 30, 2015, provide in-depth program report to the CCP | Progress: A. In progress; C. Achieved; C. Revised to Jan. 2016 |

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The county did not provide goals for FY 2015-16

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The CCP meets quarterly
Siskiyou’s CCP takes an integrated approach, budgeting by line items, which support coordinated implementation of the CCP Plan, as opposed to line items allocated to specific departments.

FY 2014-15 Allocation: Total budget of $2,657,337 includes reserves of $1,414,459.
FY 2015-16 Allocation: Total budget of $2,971,913 includes reserves if $1,729,035.

**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

Siskiyou’s CCP takes an integrated approach, budgeting by line items, which support coordinated implementation of the CCP Plan, as opposed to line items allocated to specific departments.

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

- **Other (To Be Determined)**: $60,370
- **Correctional Counseling**: $6,548
- **BI, Inc.**: $12,600
- **HealTherapy, Inc.**: $224,796
- **Shasta Training and Consulting**: $10,000
- **Redwood Toxicology Labs**: $5,500
- **Siskiyou Community Services Council**: $101,503

FY 2015-16: $414,145
FY 2014-15: $192,526
Responses to Optional Survey Questions

**Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?**

Yes, most program curricula used includes an evaluation component.

**Does the county consider evaluation results when funding programs and/or services?**

To some extent, although evaluation data is available for most programs, the CCP does not yet deliberate this information prior to determining funding. Overall data, including recidivism statistics, is provided annually to the Board of Supervisors as part of the Annual Plan updates. The decision to approve the Plan and the associated program expenditures does factor in CCP program results.

**Does the county use BSCC definitions when collecting data? If so, which?**

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

**Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?**

81% or more. Funds are allocated to programs and services that are evidence-based or evidence-informed.

**We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?**

In partnership with many local agencies, the Day Reporting Center (DRC) has developed a holistic approach to rehabilitation and includes myriad behavioral health and readjustment services. Probationers and those serving alternative sentences are able to access these services:

- Equine experiential groups
- Individual therapy
- Anger management groups
- Drug and alcohol three-tiered program
- Thinking for Good addressing criminal thinking
- Change Companies Interactive Journaling
- Domestic violence offender program
- Women’s trauma group
- Men’s trauma group
- Alcohol and other drugs (AOD) group for those with co-occurring disorders
- Psychiatric services
- GED Prep/HS diploma completion
- System navigation with a Correctional Services Specialist
- Assistance in obtaining placement at residential treatment centers
- Employment assistance

Availability of mental health and substance abuse services outside of the DRC is evolving. Medi-Cal expansion, availability of benefits for those with mild-moderate mental health needs and local efforts to integrate behavioral health and primary care services are providing some increased community access to mental health services. Availability of mental health providers for both mild-moderate and those with severe mental health needs remains challenging. Access to substance abuse services remains limited.

Additionally, community-based educational and supportive services are provided through Family Resource Centers located throughout Siskiyou County.

**What challenges does your county face in meeting these programming and service needs?**

Siskiyou County’s vast geography (6,500 square miles) and limited public transportation creates huge challenges for service provision.

**What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?**

No substantial changes have been made.

**Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.**

Equine Therapy

Those probationers participating in equine therapy showed a 36% decrease in revocations compared to number of revocations prior to participating in the program. This compares to a 6% increase in revocations for those participating in non-equine classes. This data continues to be evaluated since only those who have previously participated successfully in classes are selected to enter the equine therapy program.
The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

- **CCP Planning**
  - FY 2015-16: $213,201
  - FY 2014-15: $174,202

- **Alternate Public Defender**
  - FY 2015-16: $36,121
  - FY 2014-15: $40,715

- **Public Defender**
  - FY 2015-16: $507,854
  - FY 2014-15: $473,838

- **District Attorney**
  - FY 2015-16: $659,683
  - FY 2014-15: $659,683

- **Task Force (Local Police Overtime)**
  - FY 2015-16: $250,000
  - FY 2014-15: $250,000

- **Sheriff Department**
  - FY 2015-16: $6,144,318
  - FY 2014-15: $6,205,172

- **Health & Social Services**
  - FY 2015-16: $1,620,614
  - FY 2014-15: $1,935,959

- **Probation Department**
  - FY 2015-16: $5,397,335
  - FY 2014-15: $4,714,695

FY 2015-16: $14,829,126  FY 2014-15: $14,454,264
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- In FY 2014-15, $1,534,990 was allocated to the Center for Positive Change.
- In FY 2015-16, $2,427,082 was allocated to the Center for Positive Change.

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- The county reported the allocation for FY 2015-16 were not yet known.

*The county declined to respond to the optional questions.*
Sonoma County

The CCP did not provide goals for FY 2014-15

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

Goal: Open a Probation Department-operated Day Reporting Center (DRC)

Objective: • The DRC will serve 150 active participants
  • 80% of participants will be present at required classes

Measure: • Number of active DRC participants
  • Class attendance measures

Progress: The Probation Department-operated DRC opened in January 2015 with 44 participants. As of November 2015, it serves 120 participants. YTD attendance is 79.6% (as of November 2015)

Goal: Perform compliance and welfare checks during law enforcement operations

Objective: • 100% of operations will include compliance and welfare checks

Measure: • Number of operations including compliance and welfare checks

Progress: 100% of operations in FY 2015-16 have included compliance and welfare checks

Goal: Increase substance use disorder treatment and mental health services to offenders upon release from jail

Objective: • Upon jail discharge, 100% of offenders will be assessed for substance use disorder treatment and mental health issues
  • 100% of offenders receiving positive assessments will be connected with treatment services

Measure: • Number of offenders receiving assessments
  • Number of offenders connected with treatment services

Total State Allocation = $12,988,188, which includes FY 15-16 main programmatic funding, FY 15-16 DA/PD revocation funding, and FY 14-15 growth funds for main programming and DA/PD revocations.
**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

<table>
<thead>
<tr>
<th>Program Type</th>
<th>2015-16 Allocations</th>
<th>2014-15 Allocations</th>
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<tbody>
<tr>
<td>Pre-Trial Services</td>
<td>$1,348,732</td>
<td>$1,497,792</td>
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<tr>
<td>Parole Revocation Hearings</td>
<td>$566,075</td>
<td>$1,497,792</td>
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<td>Mental Health Services**</td>
<td>$216,620</td>
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<tr>
<td>Jail Unit Housing</td>
<td>$358,470</td>
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<tr>
<td>Treatment Services*</td>
<td>$243,084</td>
<td>$2,140,727</td>
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<td>Programming*</td>
<td>$281,484</td>
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<td>Mental Health Services*</td>
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<td>General Assistance</td>
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<td>Employment Assistance/Training/Readiness</td>
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<td>Educational Programs</td>
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<td>DRC***</td>
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<td>Treatment Services**</td>
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<td>Community Supervision</td>
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<td>Community Service Programs</td>
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<tr>
<td>Administrative/ IT/ Legal Support</td>
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<td></td>
<td>$680,354</td>
<td>$243,084</td>
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</table>

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- Voorhis/ Robertson Justice Services, LLC: $10,000
- Inter-Faith Shelter Network: $51,120
- Goodwill Industries of the Redwood Empire: $50,000
- Evaluation Consultant TBD: $100,000
- Drug Abuse Alternatives Center & CA Human Development: $353,142
- Trope Group: $90,000
- various domestic violence curriculum providers: $7,000
- Restorative Resources: $95,000
- Carter Global Associates, LLC: $50,000
- BI, Incorporated: $320,000

*In-custody, **Out-of-custody, ***Day Reporting Center*
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The following are examples of how Sonoma County evaluates the effectiveness of its Realignment funded programs and services: As of FY 2015-16, all Realignment service contracts include outcome measures, data collection strategies and data reporting plans. Analysts periodically meet with contractors to review compliance and gather data. The Sonoma County Day Reporting Center gathers and reports participant data such as class attendance, activities completed (e.g. substance use treatment, job search guidance, meetings with educational coordinators), and overall participant outcomes. The Sonoma County Human Services Department produces a monthly report of its Realignment-funded programs. The report includes items such as enrollment in CalFresh, Medi-Cal, County Medical Services Program, and CalWORKs. Quarterly, Human Services and Probation staff meet to review the report and discuss how to improve data collection and reporting.

Does the county consider evaluation results when funding programs and/or services?

As alluded to above, rigorous and consistent data collection for program evaluation is just beginning. As data becomes available, the Probation Department will prepare reports for the CCP to consider as it makes budget allocation decisions.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% Or more. Evidence-based programming (EBP) includes the work of Probation Officers, treatment and mental health services, DUI Court, employment services, and the Day Reporting Center. Non-EBP includes housing services and assistance subsidies.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Sonoma County offers the following Realignment-funded services. Combined, these services comprise $3,883,833 or 30% of Sonoma County’s FY 2015-16 budget.

- Day Reporting Center: serves as the central point of evidence-based programming and structure for the Post-Release Community Supervision (PRCS), Mandatory Supervision and Felony Probationers in the community. Services include cognitive behavioral intervention programs, life skills, vocational skills and substance abuse treatment.
- Jail Programs: The Sheriff’s Office offers programs designed to help inmates in the following areas: address the root causes of criminal behavior; provide inmates who are released from custody with some of the skills and knowledge needed to enable them to function as contributing members of society; decrease the high-level of stress, tension and violence that can occur within correctional facilities; and establish re-entry links to enable inmates, who are released from custody, continued programming access in the Day Reporting Center and with non-profit programs in the community.
Starting Point Substance Use Disorder Services: Starting Point provides a means for offenders serving time and/or while waiting for a residential bed in the community to initiate drug and alcohol treatment. Behavioral Health counselors provide Substance Use Disorder services in the jail to substance abusing inmates over the course of their incarceration. The program offers relapse prevention, anger management, life skills instruction as well as a cognitive program designed to reduce criminal thinking, enabling participants to identify their destructive lifestyle, patterns of drug abuse and criminal behavior. Evidence-based practices and other Cognitive Behavioral techniques are key components of the curriculum.

In-Custody Mental Health Services: The Department of Health Services provides in-custody mental health staff and services for realigned inmates in the jail. The in-custody expansion of services allows mental health staff to assess any 1170(h) inmates who appear to need behavioral health services. Assessed 1170(h) inmates may subsequently be referred for medication evaluations. Inmates found to have alcohol and other drug services or mental health needs are referred to follow-up services. Upon release from custody, the 1170(h) inmates who require follow-up services are referred to the embedded Probation team or appropriate treatment provider referrals.

“1370” Restoration Services: California Penal Code Section 1370 (PC 1370) states that defendants found mentally incompetent shall have their trial or judgment suspended until they become mentally competent. If the defendant is found mentally competent, the criminal process shall resume, the trial on the offense charged shall proceed and judgment may be pronounced. The PC 1370 team provides evidence-based interventions designed to restore defendants to competency, so that they can participate in the legal process and have their cases adjudicated, thus reducing time spent in-custody. Mental Health staff assigned to this program report back to the court on the status of the restoration process as required by law. The PC 1370 team intensively case manages and engages this high-risk population in treatment services while in-custody and refers them to the appropriate out-of-custody mental health services when the case is resolved. Individuals who are not restored typically have their charges dropped with a resulting referral into services.

Domestic Violence 52-Week Course: The Probation Department will contract with certified local providers of mandated 52-week Domestic Violence programs to allow indigent offenders who pose a current safety risk to start counseling services. Offenders will be required to make a small co-payment, and funding will cover the first four months of the program.

Community Mental Health Services: A Licensed Clinical Social Worker or Marriage Family Therapist conducts mental health assessments for individuals referred by Probation staff, and subsequently refers individuals to appropriate services. An Eligibility Worker assesses individuals who need mental health services to determine their eligibility for benefits (e.g., Medi-Cal, County Medical Services Program, Social Security Insurance, CalFresh and related programs). A Psychiatrist assesses each individual’s need for medications and develops an initial medication service plan. The services provided by Behavioral Health staff embedded at Probation’s office help create system efficiencies, improve inter-departmental communication and enhance offenders’ access to needed services.

Community Substance Use Disorder Services: The Department of Health Services assigns a Substance Use Disorder Specialist to work at the Probation office to assist with the assessment, referral and case management of substance-abusing realigned offenders.

Substance Use Disorder Contract Services: The Department of Health Services contracts with local providers for residential, outpatient, and Narcotic Treatment Program services for substance-abusing AB 109 offenders. The funding provides access to a continuum of care for the AB 109 offenders that includes residential and outpatient services. The program approach is to assess and refer offenders to an existing network of Substance Use Disorder providers. Clients are referred to the appropriate service component based upon clinical assessment. In FY 2015-16, Probation and Health Services expanded this program to include on-site outpatient services at
the Day Reporting Center.

- **DUI Treatment Court**: The Sonoma County Superior Court administers the multi-agency collaborative DUI Treatment Court program, which includes enhanced alcohol monitoring through Continuous Alcohol Monitoring devices, weekly judicial reviews, intensive supervision by a Probation Officer and targeted alcohol treatment services from contracted local providers. The DUI Treatment Court targets offenders with one or two prior convictions and first-time offenders who exhibit high-risk behaviors. An established interdisciplinary team including Court staff, local treatment providers, probation professionals, representatives of the District Attorney and Public Defender offices, County treatment experts and judicial officers administer the existing program.

- The DUI Treatment Court provides a closely supervised treatment model, which employs a four-phase, graduated treatment program including counseling, drug testing, incentives and sanctions. The participants are monitored by a judicial officer and supervised by a Probation Officer, a Court Management Analyst and a Behavioral Health Coordinator.

**What challenges does your county face in meeting these programming and service needs?**

Sonoma County’s primary challenge is lack of funding. There are current unmet needs, and the CCP budget has a structural deficit that will soon force reductions to existing programming if funding is not increased. We hope that our work to earn Drug Medi-Cal certification for the Substance Use Disorder program at the Day Reporting Center will provide some financial relief. The process is time-consuming, but the anticipated result is that Federal Financial Participation will fund a large portion of program costs.

**What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?**

Recently, the Probation Department took over operation of the Day Reporting Center from a contractor. In so doing, we have improved rates of client participation, number of clients served, case coordination, data collection and reporting and depth of programming, all without increasing the Day Reporting Center budget.

**Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.**

- As mentioned above, Sonoma County’s "new" Day Reporting Center (DRC) is a promising program. As the Probation-operated Day Reporting Center opened in January 2015, and the program takes approximately 10 months to complete, the first graduations are just beginning to happen at this writing. We expect to have data to share in next year’s CCP Survey. Until then, we are encouraged by current attendance rates, offender willingness to participate in the programming and positive feedback from the offenders themselves.

- Sheriff and Probation facilities have embedded mental health and substance use disorder professionals from the Department of Health Services. In-custody services allow mental health staff to assess 1170(h) inmates who appear to need behavioral health services. Assessed 1170(h) inmates may subsequently be referred for medication evaluations. Inmates found to have alcohol and other drug services or mental health needs are referred to follow-up services. Upon release from custody, 1170(h) inmates who require follow-up services are referred to the embedded Probation team or appropriate treatment provider referrals.
Under out-of-custody services, a Licensed Clinical Social Worker conducts mental health assessments for individuals referred by Probation staff, and subsequently refers individuals to appropriate services. An Eligibility Worker assesses individuals who need mental health services to determine their eligibility for benefits (e.g., Medi-Cal, County Medical Services Program, Social Security Insurance, CalFresh, and related programs). A Psychiatrist assesses each individual’s need for medications and develops an initial medication service plan. These embedded services help create system efficiencies, improve inter-departmental communication and enhance offenders’ access to needed services.
# Goals, Objectives, Outcome Measures and Progress

## Stanislaus County

### FY 2014-15

<table>
<thead>
<tr>
<th>Goal</th>
<th>Reduce repeat offenses by AB 109 offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>• Decrease repeat arrests and convictions by AB 109 offenders</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>The Crime Analyst position became vacant during this period and was not filled until the next reporting period</td>
</tr>
</tbody>
</table>

### FY 2015-16

<table>
<thead>
<tr>
<th>Goal</th>
<th>Invest in early intervention, education and prevention programs prior to criminal justice involvement and provide evidence-based programs to reduce recidivism</th>
</tr>
</thead>
</table>
| **Objective:** | • Early Intervention: 1) Enhance prevention programs in schools regarding gangs and drugs and 2) Create peer leadership programs in schools that model positive behaviors  
• Reduce Recidivism: 1) Enhance evidence-based programs in our public safety institutions to change criminal thought process, 2) Add a family component to treatment services, and 3) Stat-holders: What works, what support do they need, incentives |
| **Measure:** | Measures for the above goals and objectives are being developed by sub-committees |

<table>
<thead>
<tr>
<th>Goal</th>
<th>Provide stable transitional environments to ensure successful treatment and programming outcomes</th>
</tr>
</thead>
</table>
| **Objective:** | • Create a continuum of services that focuses on services to aid offenders with re-entry into the community  
• Expand transitional and supportive housing opportunities to decrease the number of homeless offenders  
• Improve vocational skills/training to align with job opportunities |
| **Measure:** | Measures for the above goals are being developed by a sub-committee and a countywide stakeholder initiative |

<table>
<thead>
<tr>
<th>Goal</th>
<th>Integrate existing data systems (justice/social services/ health, mental health, etc.) to improve data sharing and assessment</th>
</tr>
</thead>
</table>
| **Objective:** | • Identify specific data elements for analysis  
• Develop appropriate interfaces and applications  
• Develop reports that measure outcomes and costs |
| **Measure:** | Implement a data sharing warehouse |
### FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Category</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol &amp; Drug Treatment*</td>
<td>$45,000</td>
<td>$45,000</td>
</tr>
<tr>
<td>Public Defender**</td>
<td>$290,000</td>
<td>$290,000</td>
</tr>
<tr>
<td>El Concilio</td>
<td>$150,000</td>
<td>$150,000</td>
</tr>
<tr>
<td>AB 900 Public Safety Center Expansion</td>
<td>$1,000,000</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Regional Apprehension Task Force</td>
<td>$100,000</td>
<td>$100,000</td>
</tr>
<tr>
<td>Sheriff's Department</td>
<td>$412,291</td>
<td>$412,291</td>
</tr>
<tr>
<td>District Attorney &amp; Victim Services</td>
<td>$500,000</td>
<td>$500,000</td>
</tr>
<tr>
<td>Jail Medical Services***</td>
<td>$132,000</td>
<td>$132,000</td>
</tr>
<tr>
<td>Community Services Agency</td>
<td>$1,960,375</td>
<td>$1,960,375</td>
</tr>
<tr>
<td>Mental Health****</td>
<td>$4,168,263</td>
<td>$4,168,263</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$150,000</td>
<td>$150,000</td>
</tr>
<tr>
<td>CCP Planning</td>
<td>$150,000</td>
<td>$150,000</td>
</tr>
</tbody>
</table>

* Nirvana Drug & Alcohol Treatment Institute, **Public Defender/Indigent Defender Fund, ***Chief Executive Office for California Forensics Medical Group Contract Expansion, ****Behavioral Heath & Recovery Services

FY 2014-15 Allocation: The county set aside an additional $1 million that was in fund balance for the future opening of the AB 900 jail expansion project. The $1 million has not yet been expended rather it is earmarked for future expenses and came from prior year's fund balance.

### FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

- In FY 2014-15 and 2015-16, $2,078,197 and $1,960,375 respectively, was allocated to the Behavioral Health and Recovery Service Integrated Forensics Team.

### FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- California Forensics Medical Group Expansion of Medical/Mental Health Services: $500,000 ($500,000)
- Day Reporting Center Contracts with Community-Based Organizations: $529,500 ($529,500)
- In-Custody Contracts with Community-Based Organizations: $319,600 ($319,600)
- El Concilio: $150,000 ($150,000)
- Nirvana Drug & Alcohol Treatment Institute: $45,000 ($45,000)

**FY 2015-16 - $1,544,100**

**FY 2014-15 - $1,544,100**
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

The county is in the process of evaluating the effectiveness of programs and services being delivered in custodial facilities and through the Day Reporting Center. Work has been completed to upgrade the county's integrated information system so that the required data is now captured to evaluate effectiveness at the program level. A crime analyst has been hired to assist in the evaluation. Baseline data is being captured as well. Evaluation has not yet been completed.

Does the county consider evaluation results when funding programs and/or services?

Yes, programs and services, currently funded, must provide performance information at the time of program renewal. The county is in the process of creating a database so that the Crime Analyst can evaluate the effectiveness rather than each funded program providing their own performance information.

Does the county use BSCC definitions when collecting data? If so, which?

No.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%, Unknown - programs such as Thinking for a Change have been implemented in both in-custody facility programs and at the Day Reporting Center. Validated assessment tools are being used in-custody and at the Day Reporting Center. It is difficult to capture these costs as Sheriff and Probation staff have been trained to provide these services. Behavioral Health & Recovery Services utilizes evidence-based treatment services in providing Integrated Forensics Team services. Swift and certain sanctions and incentives have been proven to be effective to reducing recidivism.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

The county is providing substance abuse treatment, mental health treatment, job readiness, anger management, cognitive-based therapies, restitution and victim awareness education, life skills programming, GED preparation, clean and sober living environments, religious/faith-based services, parenting courses and classes designed to prevent property crimes. These services are primarily delivered in-custody and at the Day Reporting Center.

What challenges does your county face in meeting these programming and service needs?

- Financial resources - classes are impacted and in need of expansion.
- We are in need of a seamless transition from in-custody to out-of-custody programming, ensuring offenders do not fall through the cracks.
- We need more volunteers to help support offenders and keep them on a good path.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- We are pursuing a County Data Warehouse where data can be shared and used to guide policy and financial decisions. This information will aid the county in learning where we need to focus resources and to identify what is working or not working. It will also assist in tracking offenders beyond periods of supervision.
- Private and public agencies are working well together to address the needs of criminal justice system.
- Programs are being tailored to individual offenders based on validate risk assessments within custodial facilities. This has enabled the Sheriff’s Office to stop mixing lower risk offenders in programs with higher risk offenders.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

We currently believe that Thinking for a Change (T4C) is one of the best programs out right now in effecting change in people’s lives and reducing recidivism. It is cognitive- as well as evidence-based. Our probation department utilizes this program and our sheriff’s department has just adopted it and is due to roll it out in January. Though we have no data on it as a department yet, it is evidence-based and the results in reducing recidivism are very positive and proven as shared below.

Recidivism

Lowenkamp and colleagues (2009) found that there was a statistically significant differences in the proportion of offenders who recidivated between the treatment group, who received the T4C curriculum, and the control group, who did not. Specifically, 23 percent of the treatment group recidivated (i.e., they were arrested for a new offense), compared with 36 percent of the control group. The difference indicates that the control group was 1.57 times as likely (or 57 percent more likely) to be arrested during the follow-up period.

Multivariate analysis showed that when controlling for confounding factors, the odds of the control group being arrested during the follow-up were almost double that of the treatment group. After adjusting for the net effects of risk, age, race, gender and follow-up time, the recidivism rate of the treatment group was 15 percentage points lower than that of the control group (28 percent versus 42 percent, a significant difference). The multivariate model also showed that the significant predictors of recidivism were age, risk category and group membership, meaning that younger offenders, higher-risk offenders and offenders in the comparison group were more likely to be arrested for a new offense during the follow-up period.

Also a small attempt is being made by Dr. Geni Boyer, Enterprise. She is conducting a 12 week work preparedness class for adults. She focuses on “Soft Skills” and encourages real transformation in people who are homeless as well as without employment. She has an 80% effective rate of placing her students in jobs. They become good employees. Her work is in collaboration with Modesto Gospel Mission. She is in the Evidence-Base Vetting process. She holds a Ph.D in Neuro Plasticity and employs that disciplines principles within the context of her course.
### Sutter County

**Goals, Objectives, Outcome Measures and Progress**

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Provide employment services to out-of-custody supervised offenders at the Probation Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>• 40% of referred offenders will obtain employment</td>
</tr>
<tr>
<td>Measure:</td>
<td>• Number of offenders who obtained employment through the Probation Department's employment services</td>
</tr>
<tr>
<td>Progress:</td>
<td>30 of the 99 referred offenders, or 30%, obtained employment in FY 2014-15</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Maximize probation treatment services for out-of-custody offenders who are referred to treatment</th>
</tr>
</thead>
</table>
| Objective: | • Increase the number of referred offenders who complete assessment and engage services by 10%  
• Increase the number of offenders being referred by Probation Officers for treatment services by 20% |
| Measure: | • Number of offenders who were assessed and subsequently became engaged in treatment services |
| Progress: | 42% of referred offenders completed assessment and engaged in services down from 72% in FY 2013-14 |

**FY 2015-16**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Provide employment services to out-of-custody supervised offenders at the Probation Department.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective:</td>
<td>• 40% of referred offenders will obtain employment</td>
</tr>
<tr>
<td>Measure:</td>
<td>• Number of offenders who obtained employment through the Probation Department's employment services</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Provide adult education services in the jail to in-custody offenders</th>
</tr>
</thead>
</table>
| Objective: | • 80% of jail inmates will be offered adult education services while in-custody during the fiscal year  
• An average of 15% of jail inmates will participate in education services while in-custody during the fiscal year |
| Measure: | • How many jail inmates were offered the option of attending adult education services.  
• The number of jail inmates who participated in adult education services |
**Goal:** Maximize probation treatment services for out of-custody offenders who are referred for treatment

**Objective:** • Increase the number of referred offenders who complete assessments and engage in services by 10%

**Measure:** • Number of offenders who were assessed and became engaged in CHOICES, Recovery Basics and Moral Reconciliation Therapy™ (MRT™) treatment services

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**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2014-15 Allocation</th>
<th>FY 2015-16 Allocation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Reserve Fund*</td>
<td>$63,390</td>
<td>$210,381</td>
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<tr>
<td>Police Department</td>
<td>$16,000</td>
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<tr>
<td>Public Defender</td>
<td>$18,000</td>
<td>$17,000</td>
</tr>
<tr>
<td>District Attorney</td>
<td>$159,714</td>
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<tr>
<td>Mental Health Department</td>
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</tr>
<tr>
<td>Health Department</td>
<td>$263,972</td>
<td>$365,355</td>
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<tr>
<td>Sheriff/Jail Department</td>
<td></td>
<td>$941,686</td>
</tr>
<tr>
<td>Probation Department</td>
<td></td>
<td>$905,614</td>
</tr>
</tbody>
</table>


FY 2015-16 Allocation: Total allocation received includes $2,2597,388 and FY 2014-15 growth of $588,109. Sutter county has only received 3 of the 12 allocation payments. This is a budget based on FY 2014-15.

*In FY 2014-15 this is being carried over to be used to service the community in the next fiscal year. In FY 2015-16, this is the difference between the amount budgeted and the projected revenue allocation, included estimated growth funding.
In FY 2014-15, $25,000 was allocated from the Community Recidivism Reduction Grant from the BSCC and was distributed to 4 non-public agencies for programs and services.
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Locally, program effectiveness is mostly defined by program completion and/or other positive outcomes such as attainment of educational goals, employment, engagement in therapeutic or mental health services and successful completion of supervision without recidivating. The CCP contracts with a full-time data analyst who collects data for the various departments involved and reports out to the CCP at the regular meetings. Sutter County Probation also has a Supervising Probation Officer who oversees the programs unit and collects data related to programs and services delivered by the Probation Department to both in-custody and out-of-custody adult offenders.

Does the county consider evaluation results when funding programs and/or services?

During FY 2014-15, it was determined that based on the number of referrals to adult education services in the Probation Department's resource center, there was no longer a need to fund a full-time adult education teacher position to address the need for services. For FY 2015-16, that position was reduced to 18 hours per week, which currently meets the needs of the department. The department also increases or decreases the number and types of substance abuse and behavior modification programs offered at the department and in the jail to meet the needs based on assessment data and referrals to programs.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more. Every Probation Officer or Intervention Counselor in the Probation Department's programs unit uses evidence-based practices in delivering curriculum and facilitating groups, both in house and at the jail. Even the Workforce Specialist at the Probation Department is trained in Motivational Interviewing techniques and attends booster training sessions with the other officers and programs staff. All Probation Officers in our county have been trained in Motivational Interviewing and CHANGE Companies' Courage to Change journaling curriculum.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Sutter County currently offers the following services:

- Outpatient treatment programs, at the Probation Department and through the Mental Health Department, for moderate and high-risk offenders. These programs utilize the matrix substance abuse curriculum, and Moral Reconation Therapy™ (MRT™) for behavior modification.
- The county also has grant funding for one Mental Health Therapist to be housed at the Probation Department to provide services to supervised offenders while they are still in-custody, and to continue those services upon their release. Realignment funds also pay for a Mental Health Therapist to be housed at the jail to assess offenders who are suspected or known to have mental health needs when they are first brought into custody. The therapist follows up to make sure that the inmates needs continue to be met during their stay in the jail and helps plan for their transition to mental health services upon their release.
• The Probation Department also provides Batterer Treatment Program services to ensure that the inmates' needs continue to be met during their stay in the jail and helps plan for their transition to mental health services upon their release. The Probation Department also provides Batterer Treatment Program services to moderate and high-risk offenders at the Probation Office. Realignment funds also pay for a part-time adult education teacher in the jail and another part-time adult education teacher at the Probation Department.

• Realignment funds also pay for a full-time Workforce Specialist housed at the Probation Department.

• The Probation Department also provides a variety of ancillary programs to offenders. These programs include Functional Family Therapy (FFT), Seeking Safety, Courage to Change journaling program and Coping with Anger. Probation also offers a Recovery Basics program for Low-Risk/High Drug and Alcohol need offenders.

• For in-custody offenders, Intervention Counselors, funded by AB 109, provide MRT™, Coping with Anger and Peer Relationships groups to both the male and female populations.

What challenges does your county face in meeting these programming and service needs?

One of the major challenges to meeting the programming needs of in-custody offenders is the jail's classification of inmates. Because of housing issues, some inmates are assigned to units where no services are offered. Another barrier to providing services in the jail is the lack of treatment meeting space. At times, meeting space is an issue for program offerings at the Probation Department as well. Treatment staff turnover has been a problem at times, and the scarcity of local program training results in having to send staff further away, sometimes out of state, to be trained to facilitate evidence-based practice (EBP) programs.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

Sutter County Probation has not only implemented new programs with our focus on the principles of effective intervention, we have also assessed existing programs to make sure adjustments and improvements are made. For example, our Drug Court program is a well-established, respected tool that has been a resource for over a decade. We have made a concerted effort to align it with what we know about EBP programs. We recently sent our Drug Court staff to continued training, and plan to make even more adjustments in the near future to insure the program reflects best practices across the board.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Probation Department's in-house Batterer's Treatment Program (BTP) is using an MRT™ based domestic violence curriculum "Bringing Peace to Relationships" with a high-risk population. This use of EBP in BTP and concentrating its delivery to a high-risk population is innovative in our area, and we have seen positive results. Many participants have expressed benefits from their attendance.
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Community Corrections Partnership Membership
(November 2, 2015)

Richard A. Muench
Chief Probation Officer

Lore Chrasta
Presiding judge or designee

Dennis Garton
County supervisor or chief administrative officer or designee

Gregg Cohen
District Attorney

Christopher Logan
Public Defender

Dave Hencratt
Sheriff

Kyle Sanders
Chief of Police

Amanda Sharp
Department of Social Services

Valerie Lucero
Department of Mental Health and Alcohol and Substance Abuse Programs

Vacant
Department of Employment

Charles Allen
Office of Education

Vacant
Community-based organization

Linda Lucas
Victims’ interests

The CCP meets quarterly

---

The CCP did not provide goals for FY 2014-15 or 2015-16

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th></th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Schaffer Work</td>
<td>$130,000</td>
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<tr>
<td>Instructional Services</td>
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<tr>
<td>Red Bluff Police</td>
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<tr>
<td>Transitional</td>
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<tr>
<td>Housing New Covenant</td>
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<td>Health Services</td>
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<tr>
<td>Probation</td>
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<td>$1,387,989</td>
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</table>

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

FY 2014-15: *Probation* (Employment Program Contract, including Wood working & welding $107,300, Red Bluff Police, Gang Prevention Program $45,000, Transitional Housing Contract $202,000) **Health** (Client Transportation $9,000, Cognitive-Based Behavioral Change System $25,000, Residential Treatment $42,250, Psychiatrist/Medication $10,000).

FY 2015-16: *Probation* (Employment Program Contract, including Wood working & welding $107,300, Red Bluff Police, Gang Prevention Program $45,000, Transitional Housing Contract $202,000) **Health** (Client Transportation $9,000, Cognitive-Based Behavioral Change System $25,000, Residential Treatment $42,250, Psychiatrist/Medication $10,000).

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

FY 2014-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. The County is in the process of identifying data systems to support outcome measurements. It is the intent of the team to engage technical assistance in FY 2015-16. In the meantime, effectiveness is measured by the public reaction to the programs in place.

Does the county consider evaluation results when funding programs and/or services?

No.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction and length of stay.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41%-60%. This figure is an estimation.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Crisis Intervention
- Group Counselors group work
- Outpatient Treatment
- Behavioral Health Court
- Drug Court

What challenges does your county face in meeting these programming and service needs?

Tehama County is located in a rural part of California with few community-based organizations that offer services. Few evidence-based practices were offered in the community prior to Realignment so the County needed to train existing staff in the services necessary to reduce recidivism.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

One of the biggest changes was to keep the public informed and involved. By having positive news published and keeping the public involved the community is more likely to show support of the programming taking place to reduce recidivism. The information about the services currently being offered can be disseminated to the public done through speaking engagements, press releases and taking reporters on informative trips.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
Trinity County
Goals, Objectives, Outcome Measures and Progress
FY 2014-15

**Goal:** Improve success rates of AB 109 offenders

**Objective:**
- Maintain low recidivism rates
- Reduce victimization
- Increased community safety

**Measure:**
- Implement a streamlined and efficient system in the County of Trinity to manage additional responsibilities under Realignment
- Implement a system that protects public safety and uses best practices in recidivism reduction
- Implement a system that effectively uses alternatives to pre-trial and post-conviction incarceration, where appropriate

**Progress:** Recidivism rates remain low, the pre-trial assessment tool has been implemented in the jail and GPS monitoring is used on Post-Release Community Supervision (PRCS) offenders on initial release from prison

---

**Goal:** Design and implement a new Re-entry Program Improvement Project

**Objective:**
- Early engagement with our clients when possible
- Comprehensive case planning (shared goals and strategies between the partnering agencies)
- Dosage relative to the stage of re-entry. Creative incentives and rewards interrelated with the re-entry stage and performance towards meeting case plan goals

**Measure:**
- Complete the new Re-entry Program Improvement Project design
- CCP to fund additional positions with Sheriff, Behavioral Health and Human Response Network
- Meet early engagement goal by sending our AB 109 team to the prison to transport client back to county upon release from custody and begin the case planning

**Progress:** Re-entry Program design and implementation is progressing with most additional staff hired
Goal: Expand Transitional Housing Program

Objective: • Increase availability of transitional housing with case management services
  • Provide stability to clients upon re-entry to community
  • Case manager connects clients to appropriate services upon re-entry to community

Measure: • Increase funding to Human Response Network to meet goal
  • Place otherwise homeless clients into transitional housing with case management services coordinated by Human Response Network staff

Progress: Good progress has been made. CCP increased funding to Human Response Network which provided additional transitional housing and a half-time case manager

The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2015-16</th>
<th>FY 2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Probation Roll Over</td>
<td>$48,167</td>
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<tr>
<td>Behavioral Health</td>
<td>$5,894</td>
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<td>Sheriff</td>
<td>$65,059</td>
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<td>District Attorney</td>
<td>$5,000</td>
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<tr>
<td>Probation Department</td>
<td>$246,460</td>
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</table>

FY 2015-16 - $556,814  FY 2014-15 - $370,580
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program/Service</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
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<tbody>
<tr>
<td>Risk Assessment Tools</td>
<td>$17,638</td>
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<tr>
<td>Drug Testing</td>
<td>$3,500</td>
<td>$2,500</td>
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<tr>
<td>Electronic Monitoring Equipment</td>
<td></td>
<td>$10,000</td>
</tr>
</tbody>
</table>

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

- In FY 2014-15, $25,000 was allocated to the Human Response Network (Local Non-Profit)
- In FY 2015-16, $25,000 was allocated to the Human Response Network (Local Non-Profit)
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

This continues to be a work in progress but we are measuring recidivism rates, Behavioral Health program completion rates, successful completions of Post-Release Community Supervision (PRCS) supervision rates, flash incarceration and full revocation rates, and clients receiving transitional housing and case management services. After full implementation of the Re-entry Program Improvement Project will be establishing additional criteria for evaluating our effectiveness.

Does the county consider evaluation results when funding programs and/or services?

Yes, the CCP is working to identify the programs and services that produce the best outcomes and adjusting funding accordingly.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for average daily population, conviction, length of stay and treatment program completion rates

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%. This is an estimate.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Trinity County Behavioral Health Services (TCBHS) offers Mental Health and Alcohol and Other Drug Services (AODS).
- Mental Health offers outpatient assessment, treatment by licensed clinicians and APA Board-certified psychiatrists, both in person and tele-med.
- AODS provides assessment, outpatient treatment and Moral Reconciliation Therapy™ (MRT™) at BHS and in the jail by state certified counselors.
- AODS and MH administer evidence-based programs and practices, such as Cognitive Behavioral Therapy (CBT), MRT™, Seeking Safety and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT).

What challenges does your county face in meeting these programming and service needs?

Lack of resources: staff and funding.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

AODS has added a dedicated AB 109 Substance Abuse Specialist 1, funded 80% by CCP Growth dollars, to join Probation Officer to do outreach, pick up PRCS at release, immediately engage in services and provide case management linkage and transportation to other services, including AODS, mental health (MH) and primary health care and general social services such as housing, benefits, food support, vocational and education support, etc.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The county declined to respond to this question.
# Tulare County

**Goals, Objectives, Outcome Measures and Progress**

**FY 2014-15**

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Expand education and treatment services in both day reporting centers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>Add GED preparation</td>
</tr>
<tr>
<td></td>
<td>Add drug/alcohol treatment</td>
</tr>
<tr>
<td></td>
<td>Expand vocational education based on CareerScope results</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Identify instructors/providers by March 15, 2015</td>
</tr>
<tr>
<td></td>
<td>Introduce programming by April 1, 2015</td>
</tr>
<tr>
<td></td>
<td>Evaluate successful completion rates for the 6 month period pre- and post-expansion of services</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>This project stalled in December 2014 based on a significant reduction in the jail population following the passage of Proposition 47 and issues involving the re-model of a South County location</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Develop transition services for homeless women</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective:</strong></td>
<td>Identify a housing provider (minimum 6 beds)</td>
</tr>
<tr>
<td></td>
<td>Develop linkages to services needed as identified by the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)</td>
</tr>
<tr>
<td></td>
<td>Participants will be self-sufficient within 180 days</td>
</tr>
<tr>
<td><strong>Measure:</strong></td>
<td>Identify a provider by February 1, 2015</td>
</tr>
<tr>
<td></td>
<td>Assess a minimum of 12 female inmates for potential placement and service needs by March 1, 2015</td>
</tr>
<tr>
<td></td>
<td>Place first individual on or before March 25, 2015</td>
</tr>
<tr>
<td><strong>Progress:</strong></td>
<td>A provider was identified before August 8, 2014. During the period of September 3, 2014 and June 30, 2015, a total of 15 women were assessed for services and a total of 14 women entered the program. The current status of those completing the program is pending evaluation.</td>
</tr>
</tbody>
</table>
Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Develop a seamless continuum of care from incarceration to probation supervision and/or completion of straight commitment

Objective:
- Allow offenders to begin/complete court-ordered or other needs-driven treatment while in-custody
- Provide offenders with release incentives based on participation and positive behavior
- Provide a custodial experience that promotes rehabilitation and assists in transition to the community

Measure:
- Develop a complete treatment/program outline, including costs, by February 2, 2016
- Re-tool the existing Jail Transition Team into a multi-disciplinary team with additional participants by April 1, 2016
- Develop contracts/service agreements with providers by May 1, 2016

Goal: Establish a supervised pre-trial release program for offenders released on own recognizance (OR) or enhanced bail terms

Objective:
- Allow for the safe release of adult offenders pending trial/sentencing
- Manage the average daily jail population to avoid early releases based on population spikes
- Expand services designed to avoid the pre-trial detention of individuals unable to post bail

Measure:
- Designate Probation Department personnel on or before December 1, 2015
- Have program in place, serving clients, on or before January 1, 2016
- Provide pre-trial supervision services to 60 individuals by July 1, 2016

Goal: Begin formal evaluation of treatment provider outcomes

Objective:
- Determine which programs are impacting recidivism
- Improve outcomes by sharing information with existing providers to validate or provide direction and/or training for improvement
- Quality control of treatment services available to adult offenders

Measure:
- Form an evaluation team of CCP representatives by January 1, 2016
- Identify three providers for evaluation by February 1, 2016
- Complete provider evaluations and provide a report to the CCP by June 30, 2016
FY 2014-15 Allocation: Total allocation includes $12,119,805 base allocation and $1,396,211 growth.

FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services
**FY 2014-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

<table>
<thead>
<tr>
<th>Department</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheriff's Department</td>
<td>$167,558</td>
<td>$499,860</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$1,292,600</td>
<td>$1,195,000</td>
</tr>
</tbody>
</table>

**FY 2014-15: Probation** (Porterville Halfway House $265,000, Stephen Bindler, Ph.D $50,000, Counseling & Psychotherapy Center $50,000, Central Valley Recovery Resources $100,000, Transition 2 New Life $50,000, Turning Point of Central California, Inc $265,000, Visalia Rescue Mission $50,000, Westcare $265,000, Alliant University $50,000, BI, Inc. $35,000, Creekside Laser: $15,000) **Sheriff** (BI, Inc. $24,458, CareerScope $1,000, Alternative Services: $96,350, Williams Scotsman $12,393, The Change Company $621, Aardvark $7,515, CDW Government $6,838, Vocational Research Institute $349, QuickPCS Support LLC. $7,048, Beatwear, Inc. $4,755, Office Depot: $6,231).

**FY 2015-16: Probation** (Porterville Halfway House $265,000, Stephen Bindler, Ph.D. $50,000, Counseling & Psychotherapy Center $43,500, Central Valley Recovery Resources $167,000, Transition 2 New Life $50,000, Turning Point of Central California, Inc. $265,000, Visalia Rescue Mission $50,000, Westcare $265,000, Alliant University $50,000, BI, Inc. $60,600, Creekside Laser $15,000, Sisterhood of Grace $11,000) **Sheriff** (BI, Inc. $161,967, CareerScope $1,500, Alternative Services $200,000, Williams Scotsman $12,393, The Change Company $2,000, Scott McClure $3,000, Family Services of Tulare County $116,000, Vocational Research Institute $3,000).
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Program outcomes are tracked within our case management systems. Formal evaluations will commence this fiscal year.

Does the county consider evaluation results when funding programs and/or services?

All provider contracts are reviewed on a yearly basis and as issues occur. We have discontinued use of three providers based on poor performance and/or business practices.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%. Our percentile should increase significantly with expanded jail programming.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Collaborative Court Programs
- Mental Health Court
- Drug Court
- Prop B6436 Court
- Domestic Violence Court
- Driving Under the Influence Court

Treatment Programs
- Sex Offender Treatment (CPC America)
- Batterer's Treatment (certified by the Probation Department)
- Dual-Diagnosis inpatient, outpatient and re-entry
- Substance Abuse inpatient, outpatient and re-entry
- Medication Management groups
- Theft Diversion groups

What challenges does your county face in meeting these programming and service needs?

Our substance abuse providers are in need of training on evidence-based practices/curriculum. We will be evaluating one of our largest providers of this service during this fiscal year and regardless of the outcome, training will be provided.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The county declined to respond to this question.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Assessment Team: post-release community supervision (PRCS) and 1170(h) offenders receive a Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment, a mental health screening and a benefit eligibility determination on the date of reporting by a team consisting of staff from the Probation Department and the Health and Human Services Agency.

RESET Program: In partnership with the Workforce Investment Board, the Probation Department provides interest/aptitude testing, job readiness training and job placement services for convicted felony offenders.

Transitions/Re-entry Program: Services are currently provided by the Sheriff's Office to inmates the last 90 days of incarceration and includes an individualized Discharge Plan that includes goals, pre-scheduled appointments for services and notification of release to the assigned Deputy Probation Officer.
Tuolumne County

Goals, Objectives, Outcome Measures and Progress

FY 2014-15

**Goal:** Increase the number of Day Reporting Center (DRC) participants who graduate the program

**Objective:**
- Support participants to keep them progressing through all program steps in DRC program
- 75% of all program participants referred to the DRC will graduate from the program

**Measure:**
- Number of participants in the DRC who are terminated from the program
- Number of participants who graduate the program

**Progress:** Overall, the program has a 46% success rate (success defined in question 27) which is commendable given the difficulty of the program. Tuolumne County’s success rate is well above neighboring counties. Tuolumne County expects to see a slight increase in the FY 2015-16 success rate.

**Goal:** Assist DRC participants in securing housing

**Objective:**
- Work with the DRC participants to complete the application process for the homeless
- Increase by 10% the number of homeless participants who secure housing

Goals, Objectives, Outcome Measures and Progress

FY 2015-16

**Goal:** Reduce the number of pre-trial offenders held in secure detention

**Objective:**
- Adopt an evidence-based risk assessment tool
- Adopting new release conditions
Goal: Increase the number of DRC participants who graduate the program

Objective:
- Support participants to keep them progressing through all program steps in the DRC program
  - 75% of all program participants referred to the DRC will graduate from the program

Measure:
- Number of participants in the DRC who are terminated from the program
- Number of participants who graduate from the program

Progress: Overall, the program has a 46% success rate (definition of success mentioned in question 27) which is commendable given the difficulty of the program. Tuolumne County’s success rate is well above neighboring counties. Tuolumne County expects to see a slight increase in the FY 2015-16 success rate

Goal: Assist DRC participants in securing housing

Objective:
- Work with DRC participants to complete the application process for the homeless
- Increase by 10% the number of homeless participants who secure housing

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

*Includes In-custody Jail Re-entry Program contract with Behavioral Interventions Inc.
**Includes contact with Behavioral Interventions Inc.
FY 2014-15 Allocation and FY 2015-16 Allocation more than received in fiscal year.
In FY 2014-15 and 2015-16, $4,000 and $1000 respectively. was allocated to the Amador Tuolumne County Action Agency (ATCAA) for housing support.

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**

- **(BI) Inc. - Day Reporting Center (DRC)**: $390,000
- **(BI) Inc. - Jail Re-Entry Program**: $132,000
- **Redwood Toxicology - Drug Testing**: $5,000
- **(BI) Inc. - Electronic Monitoring**: $150,000

FY 2015-16 - $677,000
FY 2014-15 - $676,000
Responses to Optional Survey Questions

**Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?**

Yes. In this last fiscal year, the Probation Department compiled an overall analysis of all AB 109 funded programs and services. This includes overall success rates of the programs implemented with AB 109 funds. The department also evaluated the effectiveness of the Day Treatment Program that serves as a day jail for offenders that are too mentally or physically fragile to serve jail time or participate in work programs. Overall, findings proved that it was an ineffective way to spend department dollars. Staffing costs alone were extremely high, and attendance was at an all-time low (averaging about 3 individuals two times per week). The County CCP members voted unanimously to discontinue the program. The Probation Department Staff Services Analyst also keeps track of all things AB 109 monthly, quarterly and annually to evaluate overall effectiveness of programs and services.

**Does the county consider evaluation results when funding programs and/or services?**

Currently, as well as, moving forward the department utilizes evidence-based and promising practices to provide the most effective programming for offenders.

**Does the county use BSCC definitions when collecting data? If so, which?**

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

**Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?**

81% or more

**We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?**

Tuolumne County Behavioral Health treats severe and persistent mentally ill clients and provides alcohol and drug treatment. Tuolumne County Behavioral Health primarily serves Medi-Cal clients. The closest psychiatrist that treats non Medi-Cal clients is 50 to 60 miles away.

**What challenges does your county face in meeting these programming and service needs?**

Tuolumne County is currently spending more on AB 109 programs and services than allocated. Staffing capacity is also a concern for the county. It is very difficult to find credible staff that satisfy the specific job requirements and remain in the county.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The department has evaluated the effectiveness of the Day Treatment Program that serves as a day jail for low-risk offenders that are too mentally or physically fragile to serve jail time or participate in work programs. The findings proved that the program was an ineffective way to spend department dollars. Staffing costs were high and attendance was at an all time low (averaging about 3 individuals two times monitoring devices).

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Tuolumne County contracts with an outside agency known as Behavioral Interventions (BI) Inc. that provides evidence-based programming to high-risk offenders. This is known as the Day Reporting Center (DRC) Program. This program includes individual therapy, group therapy and Moral Reconation Therapy™. This program is very extensive and demanding. In order to successfully complete the program individuals must complete phase I-III, aftercare and obtain successful employment and housing. This can be a minimum of 210 days. In order to advance to the next phase, the participant must complete each step listed in their moral reconation workbook and remain drug free. From the start of the program January 1st, 2012 to June 30th, the Tuolumne County DRC has a 46% success rate. Given the difficulty of the program and the type of offenders (typically Post-Release Community Supervision, or High Risk) a 46% rate is commendable. Tuolumne County's success rate is well above neighboring counties. This can be attributed to intense cooperation between BI staff, Probation and the Sheriff's Office staff. BI also provides a similar type of program in the county jail. This is called the Jail Re-Entry Program (JRP) and provides evidence-based programming to offenders while incarcerated. From the start of the JRP November 2013 to June 30th 2015 the JRP has a 68% success rate.
Ventura County

Goals, Objectives, Outcome Measures and Progress
FY 2014-15

Goal: Reduce the recidivism rate of AB 109 offenders

Objective: • Define recidivism in Ventura County
• Establish a baseline recidivism rate

Measure: • Recidivism was defined by CCP
• Identify recidivism reduction rate
• Retrospective recidivism data to be collected/analyzed for baseline

Progress: In addition to the BSCC definition, the CCP agreed upon definitions of recidivism and retrospective recidivism data being analyzed

Goal: Increase alternatives to incarceration and services for offenders by fiscal year 2015

Objective: • Develop a matrix of graduated responses to violation behavior
• Develop incentives for offenders to be successful
• Develop alternative to incarceration, including electronic monitoring (EM), GPS and pre-trial

Measure: • Matrix document of graduated responses
• Document of available incentives of offenders
• Implement alternative to incarceration options

Progress: Matrix on sanction and incentives have been developed and EM, GPS and pre-trial are implemented

Goal: Use risk/needs information at front end of system and at sentencing by July 1, 2015

Objective: • Develop and implement pre-trial program incorporating a validated assessment
• Include risk/needs assessment for judicial consideration at sentencing

Measure: • Administer and implement pre-trial assessment
• Administer and implement the Ohio Risk Assessment System-Community Supervision Tool (ORAS-CST) risk/needs assessment at sentencing

Progress: This goal was fully completed this year
Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Develop multi-agency dashboard

Objective:
- Define measures to be collected
- Identify sources to pull information from
- Develop dashboard design and access

Measure:
- Identification of measures
- Identification of data sources
- Development, access and implementation

Progress: Subcommittee and IT services working on development.

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
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<tbody>
<tr>
<td>Community-Based Orgs</td>
<td>$1,250,000</td>
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<tr>
<td>Law Enforcement Partners</td>
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<td>Behavioral Health</td>
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<td>Sheriff</td>
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<td>$8,108,081</td>
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<td>Probation</td>
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<tr>
<td>District Attorney</td>
<td>$588,285</td>
<td>$684,341</td>
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FY 2015-2016 - $19,329,843  FY 2014-15 - $19,000,030
FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

FY 2014-15: District Attorney (Prosecution/Revocations/Re-entry Court $486,972, Victim Services $151,452) Public Defender (Defense/Revocations/Re-entry Court $652,614, Placement Services $180,149), Probation Agency (Post-Release Community Supervision (PRCS)/Mandatory Supervision/Pre-Trial/Revocations/Re-entry Court $4,863,865, Treatment Services $340,000) Sheriff’s Office (Electronic Monitoring $625,068, PRCS Regional Services $244,516, Crime Analysis $108,035, Jail Services – $7,544,841) Behavioral Health Department (Mental Health Treatment/Alcohol Drug Programs $1,880,442)

FY 2015-16: District Attorney (Prosecution/Revocations/Re-entry Court $436,833, Victim Services $151,452) Public Defender (Defense/Revocations/Re-entry Court $647,766, Placement Services $180,149) Probation Agency (PRCS/Mandatory Supervision/Pre-Trial/Revocations/Re-entry Court $5,357,131, Treatment Services $320,000) Sheriff’s Office (Electronic Monitoring $582,816, PRCS Regional Services $203,296, Crime Analysis $112,544, Jail Services $7,209,425) Behavioral Health Department (Mental Health Treatment/Alcohol Drug Programs $1,777,406) Local Law Enforcement Agencies (PRCS Regional Services $537,402).

FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

Coalition For Family Harmony (EBP Parenting) $57,680
Community Solutions, Inc. (Case Management) $306,809
Alternative Action Program (MRT) - approximate $250,000
Interface Children and Family Services (CBO Administration) $274,142

FY 2015-16 - $888,631 FY 2014-15 - $1,250,000
Responses to Optional Survey Questions

Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes, the CCP contracted with a vendor to conduct a comprehensive evaluation of implemented programs and practices servicing the AB 109 population. The evaluation of services is expected to be completed in 2016.

Does the county consider evaluation results when funding programs and/or services?

The county plans to use data to drive decision making. Currently, the county is developing IT infrastructure to collect and manage relevant data points that will assist criminal justice partners in policy and practice decisions.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, average daily population, conviction, length of stay and treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

41-60%. Programming administered by Behavioral Health, Human Services Agency and Core Connections are evidence-based or evidence-informed. Probation services operates a pre-trial program using a validated assessment and field officers work with AB 109 clients using evidence-based supervision principles.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

- Treatment services for probationers and AB 109 clients are available through the local county jail, community-based organizations, Human Services Agency and County Behavioral Health.
- Local jail services offer substance abuse, mental health and other services that target employment and criminogenic risk factors for inmates in custody.
- Through CCP allocations, the community-based organizations have been building capacity to deliver more and more evidence-based practices, especially to address risk factors.
- The Human Services Agency offers a robust employment program for AB 109 clients (STEPS) and offer other employment services to clients under probation supervision.
- Behavioral Health offers both substance abuse (outpatient and residential) and mental health services.

What challenges does your county face in meeting these programming and service needs?

The County often times is at capacity with a waiting list for residential programs targeting substance abuse disorders. Expanding services in this area will be a challenge.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

At the onset of allocating AB 109 funding, the CCP recognized the need to set aside funding for community-based organizations for the delivery of treatment and services. This proved to be helpful in the strategic planning of delivering treatment and services to AB 109 clients in the community.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

Pre-Trial Program: The courts have established a Pre-Trial Program servicing 1170(h) PC defendants. The Probation Agency provides staffing to conduct risk assessments and release recommendations to the court. This program relieves jail space by releasing low-risk defendants pending future Court dates.

Outcomes: For the first two years of the program, Pre-Trial has completed a total of 778 reports. Of those reports, 339 (44%) of the defendants were released on own recognizance. Out of the 339 released, 318 (94%) remained arrest free. Additionally, 290 defendants (86%) appeared for all of their court hearings as directed.
## Yolo County

### Goals, Objectives, Outcome Measures and Progress

#### FY 2014-15

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Ensure a safe environment for all residents and visitors by reducing and preventing local crime</th>
</tr>
</thead>
</table>
| Objective: | • Establish data work group to agree on baseline, minimal data needed to meet needs of CCP and its strategic plan  
  • Recommend to CCP that Police Chiefs commit to collecting recommended data  
  • Implement comprehensive continuum of substance abuse services focused on prevention by 2016 |
| Measure: | • CCP Data Subcommittee established  
  • All arrest data is tracked and submitted to Data Subcommittee for analysis  
  • Continuum of Care workshop held and needs hierarchy established for system of care referrals from CCP partner agencies |
| Progress: | All outcome measures listed above were completed in FY 2014-15 |

<table>
<thead>
<tr>
<th>Goal:</th>
<th>Hold offenders accountable</th>
</tr>
</thead>
</table>
| Objective: | • Expand Adult Community Review Board by 1-1-16 into West Sacramento  
  • Maintain jail at a maximum of 90% of occupancy 9-1-15  
  • Provide evidence-based (EBP) in-custody programming to at least 80% of eligible inmates |
| Measure: | • Adult Community Review Board is expanded into West Sacramento by 1-1-16  
  • Jail maintained at 90% of capacity  
  • Jail Treatment Coordinator hired and coordinating EBP in-custody services to maximize program enrollment to at least 80% of eligible in-custody population |
| Progress: | Adult Community Review Board expanded into West Sacramento May 2015, jail population dropped below 90% capacity in February 2015, and has remained at or below 90% since, and Jail Treatment Coordinator was hired and implemented treatment and services screenings at booking |
Goal: Restore victims and the community

Objective:
- Implement at least one evidence-based restorative justice program by FY 2016
- Implement coordinated victim notification system by 1-1-15
- Develop a baseline of victim satisfaction in Yolo County by 2016

Measure:
- Restorative justice program implemented by FY 2016
- Victim notification system implemented by FY 2016
- Implement victim satisfaction survey by 2016

Progress: Neighborhood Court implemented in West Sacramento in FY 2014-15, victim notification system adopted May of 2015, victim satisfaction survey implemented May of 2015

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Goals, Objectives, Outcome Measures and Progress FY 2015-16

Goal: Ensure a safe environment for all residents and visitors by reducing and preventing local crime

Objective:
- Increase “on-view” law enforcement by 2017
- Implement a comprehensive continuum of substance abuse services focused on prevention by 2016
- Criminal Record Access Management (CRAM) group will be asked to develop a plan for integrating systems

Measure:
- Departments use volunteer coordinators or paid positions to coordinate Neighborhood Watch efforts
- Updated gap analysis is completed and plan submitted to CCP for approval
- Plan to integrated databases recommended to CCP and Board of Supervisors

Progress: These initiatives are in progress in FY 2015-16

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Goal: Reduce recidivism

Objective:
- Reduce the recidivism rate of all sentenced offenders in the system (probation and jail) by 5% by 2016
- Increase outreach and reduce wait list for Public Defender services (expungement) by FY 2016
- Evaluate the viability of specialty courts

Measure:
- Develop baseline measure, and data collection and reporting schedule
- Identify and report wait list to the CCP regularly
- Continuously conduct an analysis to evaluate the viability of specialty courts, including mental health, drug and veterans courts

Progress: These initiatives are in progress in FY 2015-16
Goal: Build offender competency and support reintegration

Objective:
- Social workers will collaboratively work with partners to establish a system that will ensure inmates are benefitted with Medi-Cal and related services in anticipation of release from custody
- Social workers will work with pre-trial clients to develop disposition outcomes that emphasize rehabilitation and treatment
- Perform gap analysis of services required to support full reintegration of offenders into the community

Measure:
- 90% of eligible inmates leave custody with benefits imminently accessible
- 70% of clients receive better case outcomes and waitlists are reduced or eliminated
- Prepare and present a report to the CCP summarizing recommendations for successful reintegration of offenders into the community

Progress: These initiatives are in progress in FY 2015-16

FY 2014-15 and 2015-16 Budget Allocations to Public Agencies

<table>
<thead>
<tr>
<th>Public Agency</th>
<th>FY 2015-16 (-)</th>
<th>FY 2014-15 (-)</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Library</td>
<td>$11,050</td>
<td>$10,833</td>
</tr>
<tr>
<td>Health and Human Services</td>
<td>$40,000</td>
<td>$49,241</td>
</tr>
<tr>
<td>Public Defender's Office</td>
<td>$183,451</td>
<td>$153,892</td>
</tr>
<tr>
<td>Municipal Police Departments*</td>
<td>$330,000</td>
<td>$330,000</td>
</tr>
<tr>
<td>Office of Education**</td>
<td>$685,141</td>
<td>$685,141</td>
</tr>
<tr>
<td>District Attorney's Office</td>
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<td>$539,509</td>
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<tr>
<td>Sheriff's Office</td>
<td>$3,047,774</td>
<td>$2,632,661</td>
</tr>
<tr>
<td>Probation Department</td>
<td>$2,699,714</td>
<td>$3,047,774</td>
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</tbody>
</table>

*Includes Davis, Woodland, Winters and West Sacramento Police Departments
**Day Reporting Center operations
### FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Law Enforcement</td>
<td>$330,000</td>
<td>$183,451</td>
</tr>
<tr>
<td>Pre-Trial Probation Services</td>
<td>$49,241</td>
<td>$1,039,718</td>
</tr>
<tr>
<td>Health &amp; Human Services Mental Health Services</td>
<td>$40,000</td>
<td>$848,970</td>
</tr>
<tr>
<td>Day Reporting Center</td>
<td>$685,141</td>
<td>$685,141</td>
</tr>
<tr>
<td>Public Defense*</td>
<td>$153,892</td>
<td>$183,451</td>
</tr>
<tr>
<td>Probation Community Corrections Case Management</td>
<td>$539,509</td>
<td>$1,956,244</td>
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<tr>
<td>Prosecution*</td>
<td>$10,833</td>
<td>$567,065</td>
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<tr>
<td>Yolo Library Offender Literacy Support</td>
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<td>$11,050</td>
</tr>
<tr>
<td>Additional Jail Bed Support**</td>
<td>$628,033</td>
<td>$109,059</td>
</tr>
<tr>
<td>Electronic Monitoring**</td>
<td>$970,588</td>
<td>$803,104</td>
</tr>
<tr>
<td>Maintain Jail Bed Capacity**</td>
<td>$928,540</td>
<td>$1,039,471</td>
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</tbody>
</table>

*Supplemental funding, **Sheriff’s Department

### FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services

<table>
<thead>
<tr>
<th>Program</th>
<th>FY 2014-15</th>
<th>FY 2015-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victoria Malnar In-Custody Anger Management and Parenting Classes</td>
<td>$75,000</td>
<td>$75,000</td>
</tr>
<tr>
<td>Cache Creek Lodge Residential and Transitional Housing</td>
<td>$190,000</td>
<td>$190,000</td>
</tr>
<tr>
<td>Northern California Construction Training</td>
<td>$50,000</td>
<td>$79,571</td>
</tr>
<tr>
<td>Fourth and Hope Transitional Housing and Residential Substance Abuse Treatment</td>
<td>$200,000</td>
<td>$200,000</td>
</tr>
</tbody>
</table>

*FY 2015-16 - $7,797,649  FY 2014-15 - $7,100,991*
Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

Yes. In FY 2012-13 and FY 2013-14, the Crime and Justice Institute was selected to perform program fidelity reviews and technical assistance analysis for program improvement of a sample of programs (FY 2012-13), then all of the funded CCP programs in FY 2013-14 so the Board of Supervisors and the CCP could evaluate the fidelity of each program and improve administration and service delivery. Yolo County implemented the risk, need, responsivity (RNR) Simulation tools developed by the Center for Correctional Excellence at George Mason University during FY 2014-15. This web-based decision-support system was created to help jurisdictions and providers implement the RNR framework. These tools integrate the science around effective screening, assessment, programs and treatment matching to improve individual and system outcomes. The tools also provide a means of identifying programs or services that Yolo County does not currently have or should increase in order to address the needs of the offenders in the system. The intention was that by implementing this system Yolo County would see an increase in the success rates of drug abusers on supervision and a reduction in re-arrest and re-incarceration. The RNR Simulation tools provide an estimated recidivism reduction based on matching the offender’s needs with the appropriate available service or intervention. This projected recidivism rate will also inform Yolo County on the realistic estimate of the impact of this strategy and assist in estimating the cost savings realized by the strategy.

Does the county consider evaluation results when funding programs and/or services?

Yes, programs that have been evaluated by the CCP technical assistance (TA) provider the Crime and Justice Institute were required to adopt the recommendations of the TA report before receiving new allocations for their programs. Findings from the RNR report lead to the continued support and expansion of the Northern California Construction Training service contract due to the job training and placement capacity it provides.

Does the county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for Recidivism, Average Daily Population, Conviction and Treatment Program Completion.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

81% or more.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

FY 15/16 Substance Abuse Treatment Services

Residential Treatment Services
- Yolo CCP supports up to 100 individuals placed in 90 day stays

Outpatient Substance Abuse Treatment
- Unlimited referral capacity (service covered by the Affordable Care Act)
Day Reporting Center
- 687 people served in FY 14/15
- includes cognitive behavioral therapy, GED, substance abuse education, work readiness classes, substance abuse testing, transitional housing referrals, DUI classes, anger management classes, personal improvement planning, parenting classes

Transitional Housing
- capacity to serve up to 100 individuals annually in Woodland sober living housing

Mental Health Services with Health and Human Services Agency
- Severely Mentally Ill case management services on as needed basis

Substance Abuse Participation statistics from last 3 years:
FY 2012-13
- Admissions = 801
- Day Treatment = 54
- Outpatient = 348
- Residential = 372
- FY 13/14
- Admissions = 621
- Day Treatment = 50
- Outpatient = 283
- Residential = 261
- FY 14/15
- Admissions = 757
- Day Treatment = 58
- Outpatient = 261
- Residential = 438

More details on service capacity can be provided to BSCC upon request.

What challenges does your county face in meeting these programming and service needs?

The biggest challenge currently facing Yolo is limited resources for transitional housing. Even with a budget of $180,000 for transitional housing, the only available capacity is within Woodland. There is a large need within the AB 109 populations for housing in Davis and West Sacramento. This capacity is made more inadequate by competing interest to use the beds for Sheriff's Electronic Monitoring vs. Probation's Supervised Populations.

There is a significant need for the job placement services. Paid job development would provide soft skills and references for felons re-entering the community after incarceration. This is currently an under-served population.
What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

The Yolo County CCP has made most of its programmatic changes and adjustments to the Realignment funded projects and services using nationally recognized technical assistance experts from Crime and Resource Justice's Crime and Justice Institute. Two separate assessments were completed on CCP programs that included evidence-based program fidelity reviews. Both reviews provided analysis and recommended changes to the services reviewed.

The Yolo County Board of Supervisors and the CCP supported the recommended changes identified in the reviews. Using an independent third-party nationally recognized technical assistance provider created a sense of objectivity to the reviews and so the recommendations were adopted without institutional resistance sometimes created by internal audits.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

The Yolo County CCP has funded for the third year a Day Reporting Center administered by the Sacramento County Office of Education. The program has had two years of programming with the county's post-release community supervision (PRCS), 1170, Probation and Parole populations. The program offers programming under the following categories:

- Education: GED Preparation & Testing, Computer Education, Community Colleges Assistance, Vocational Programs, Referrals to regional occupation programs (ROP), Individualized Tutoring and Basic Literacy;
- Employment: WorkNet, Job Development/Search Northern California Construction Training (NCCT) and Advanced Job Readiness;
- Substance Abuse Program: Seeking Safety, Cognitive Behavioral Intervention, Relapse Prevention, Sober Living Referral and On-Site Substance Abuse Testing;
- Other Programs: 52-Week Batterers, DUI Courses, 12 Step Support Meetings, Child Support Workshops, Benefit Screening, Transitional Housing, Victim Awareness;
- Client-Centered: Evidence-Based Programming, Individualized Risk Level, Gender Specific Programming, Meet Immediate Needs of Crisis.

Program outcomes include:

Recidivism Rates for All Woodland Day Reporting Center (DRC) Clients referred during FY 2012-13 through FY 2014-15:
- Clients Served: 721
- New Offense: 209
- New Offense Rate: 29.0%
- Violation: 24
- Total Rate: 32.3%
- DRC Recidivism Target of < 35%.
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<table>
<thead>
<tr>
<th>Yuba County</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goals, Objectives, Outcome Measures and Progress</strong></td>
</tr>
<tr>
<td><strong>FY 2014-15</strong></td>
</tr>
</tbody>
</table>

**Goal:** Reduce jail population  
**Objective:**  
- Release low-level offenders on work release program (PC 4024.2)  
- Release offenders on electronic monitoring  
- Release offenders on County Parole (PC 3074)  
**Measure:**  
- Zero on house arrest

**Goal:** Maintain day reporting center  
**Objective:**  
- Work release program  
- Evidence-based programming  
**Measure:**  
- Increase referrals to day reporting center  
- 71% of clients participated in evidence-based programs

**Goal:** Establish pre-trial services program  
**Objective:**  
- Release low-level offenders pending court  
- Reduce the number of failures to appear for court  
- Reduce jail population  
**Measure:**  
- 21- Program established May 1, 2015  
- 20 attended Court and 1 Failure to Appear

*The CCP reports it will use the same goals, objectives and outcome measures identified above in FY 2015-16.*
**FY 2014-15 and 2015-16 Budget Allocations to Public Agencies**

- Sheriff Department*: $1,693,000
- Probation Department*: $1,693,000

*FY 2014-15 and 2015-16 Allocations: $25,000 to the Marysville Police Department to total $50,000

**FY 14-15 and 15-16 Allocations to Public Agencies for Programs & Services**

- Victim Services Advocate/ Intervention Counselor: $32,500
- DRC*: $25,000
- Miscellaneous*: $20,000
- Electronic Monitoring/ Sheriff Work Alternative Program: $89,750
- Community Services Officer*: $84,250
- Victim Services: $31,300
- Probation Clinical Social Worker: $24,000
- Substance Abuse Counselors*: $172,200
- Victim Services Intervention Counselor: $38,600

*Day Reporting Center

**FY 14-15 and 15-16 Allocations to Non-Public Agencies for Programs & Services**
- The county reported no allocations to non-public agencies for programs and services.
Responses to Optional Survey Questions

Does your county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

No.

Does your county consider evaluation results when funding programs and/or services?

No.

Does your county use BSCC definitions when collecting data? If so, which?

The county uses the BSCC definitions for recidivism, treatment program completion rates.

Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

61-80%.

We would like to better understand your county’s capacity to offer treatment and/or other services. What type and level of services are now available?

Substance Abuse Counseling (Individual and Group), Moral Reconciliation Therapy™ (MRT™), Domestic Violence MRT™, Mental Health, GED program and Courage for Change

What challenges does your county face in meeting these programing and service needs?

- Clients have a hard time paying for training materials.
- Clients have hard time with transportation to programs.

What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?

- The programming services we provide are with a minimal fee or free.
- Provide clients with free bus passes.

Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.

In Yuba County, the MRT™ program has high attendance and completion rates.
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APPENDIX

- Glossary of Terms
- BSCC Definitions of Key Terms
- FY 2015-16 Community Corrections Partnership Survey
Glossary of Terms

AB  Assembly Bill  
ACS  Alternative Custody Supervision  
ADP  Average Daily Population  
AOD  Alcohol and Drugs  
ART  Aggression Replacement Training®  
BH  Behavioral Health  
BI  Established in 1978, BI offers offender monitoring products and services that help federal, state, and local agencies monitor parolees, probationers, pre-trial defendants, and illegal aliens involved in the U.S. immigration court process as they live in the community. 
BJA  Bureau of Justice Assistance  
BOS  Board of Supervisors  
BSCC  Board of State and Community Corrections  
CAB  Community Advisory Board  
CAIS  Correctional Assessment and Intervention System™  
CBO  Community-Based Organization  
CBT  Cognitive Behavioral Therapy  
CCJCC  Los Angeles Countywide Criminal Justice Coordination Committee  
CCP  Community Corrections Partnership  
CDCR  California Department of Corrections and Rehabilitation  
CJI  Crime and Justice Institute  
COMPAS  Correctional Offender Management Profiling for Alternative Sanctions  
CPCA  California Police Chiefs Association  
CPOC  Chief Probation Officers of California  
CSAC  California State Association of Counties  
CSSA  California State Sheriffs Association  
DAPO  California Department of Corrections and Rehabilitation, Division of Adult Parole Operations  
DMH  Department of Mental Health  
DPO  Deputy Probation Officer  
DRC  Day Reporting Center  
EBP  Evidence-Based Practices and/or Evidence-Based Programs  
EM  Electronic Monitoring  
EPICS  Effective Practices in Community Supervision  
ESC  Executive Steering Committee  
FY  Fiscal Year  
GEO Group  Provides correctional, detention and community re-entry services with 106 facilities, approximately 85,500 beds and 20,000 employees around the globe  
HHSA  Health and Human Services Agency  
JAG  Edward Byrne Memorial Justice Assistance Grant  
JAIMS  Justice Automated Information Management Statistics  
LS/CMI  Level of Service/Case Management Inventory™  
LSI-R  Level of Service Inventory- Revised™  
MOU  Memorandum of Understanding  
MRT  Moral Reconciliation Therapy™  
MS  Mandatory Supervision  
NCCD  National Council on Crime and Delinquency  
ORAS  Ohio Risk Assessment System
OR    Own Recognizance
PPIC  Public Policy Institute of California
PRCS  Post-Release Community Supervision
PSP   Post-Release Supervised Person
      (specific to Los Angeles County)
SAMHSA Substance Abuse and Mental
      Health Services Administration
SCRAM Secure Continuous Remote Alcohol
      Monitoring
SOR   Supervised Own Recognizance
STRONG Static Risk and Offenders Needs
       Guide
SUD   Substance Use Disorder
TAY   Transitional Aged Youth
TJC   Transition from Jail to Community
Vivitrol® Prescription injectable medicine
       used to treat alcohol dependence and
       prevent relapse to opioid dependence
       after opioid detox
Assembly Bill 1050 amended Section 6027 of the Penal Code to require the Board to: “Develop definitions of key terms, including, but not limited to, ‘recidivism,’ ‘average daily population,’ ‘treatment program completion rates,’ and any other terms deemed relevant in order to facilitate consistency in local data collection, evaluation, and implementation of evidence-based practices, promising evidence-based practices, and evidence-based programs.” The following definitions have been approved by the Board.

**Average Daily Population**

Daily population is the number of inmates housed in a facility in a day. Average daily population is the daily population divided by the number of days in the period of measurement.

**Measurement**

For a monthly average daily population take the daily inmate count (usually at or near midnight), add these daily counts together and divide by the number of days in that month.

**Conviction**

Conviction is defined as:
- Entry of judgment of guilty on a plea of guilty or no contest; or
- Entry of judgment of guilty on a verdict of guilty

**Length of Stay**

Length of Stay for each inmate is the number of days from date of intake to date of release.
- The Length of Stay for each inmate is the number of days from date of intake to date of release regardless of changes in classification, housing, or sentencing status during that period.
- Any part of one calendar day counts as one day (e.g. if booked/received at 9:00pm on Monday and released at 2:00 am on Tuesday, counts as two days)
- If an inmate is released from detention multiple times during the quarter, he/she will have multiple separate lengths of stay.
- Periods spent under an alternative form of custody will not be counted towards Jail Length of Stay*.
  - Electronic monitoring
  - Work Release
  - Residential Treatment
  - Non-Residential Treatment
  - County Parole
  - Work Alternative Programs
  - Day Reporting
  - Home confinement
  *This list may not be all inclusive.

**Adult Definition of Recidivism**

Recidivism is defined as conviction of a new felony or misdemeanor committed within three years of release from custody or committed within three years of placement on supervision for a previous criminal conviction.¹

¹“Committed” refers to the date of offense, not the date of conviction.
Supplemental Measures
This definition does not preclude other measures of offender outcomes. Such measures may include new arrest, return to custody, criminal filing, violation of supervision, and level of offense (felony or misdemeanor).

Recidivism Rates
While the definition adopts a three-year standard measurement period, rates may also be measured over other time intervals such as one, two, or five years.

Treatment Program Completion Rates Treatment program completion rate is the percentage of people entering a program who go on to complete it.

Note
While this measure provides useful information for the purposes of program evaluation, by itself it does not provide a direct measure of program effectiveness.

Measurement
Treatment programs are multifaceted in their design, services and population served. To avoid unintentionally excluding programs with a narrow definition, respondents are asked to define enrollment and completion prior to calculating the treatment program completion rate.

A. Enrollment
- An enrollment definition includes criteria on admittance, intake, and/or referral. A clear start date should be captured locally.
- E.g. Enrollment in the ABC treatment program begins after the participant completes an in-take interview with a program counselor
- E.g. Enrollment in the ABC treatment program begins when the participant receives an acceptance letter

B. Completion
- A completion definition includes criteria on the steps a participant must take to finish the program. The client’s status at departure (e.g. met criteria, transferred out of program, dismissed from program, etc.) and date of completion should be captured locally.
- E.g. Completion in the ABC treatment program is defined as graduation from phases 1-3
- E.g. Completion of the ABC treatment program is achieved when the participant receives a Certificate of Completion

Formula
\[
\text{Number Completed} = \frac{\text{Number Enrolled}}{\text{Completion Rate}}
\]

1. Tally the number of participants who have enrolled in the program
2. Tally the number of participants who have completed the program
3. Divide completions by enrollment to arrive at the completion rate
Introduction

This survey is designed to help Californians understand the efforts you have made to implement Public Safety Realignment. The information you share will be used as the basis of the BSCC’s annual report to the Governor and Legislature that illustrates how counties are allocating funds to reduce recidivism while keeping communities safe. We hope that you also will answer a few optional questions that will show how individual counties are responding to the unique needs of local offenders, and what, if any, challenges have resulted. Counties that complete the survey are compensated for those efforts.

The Budget Act of 2015 (AB 93, Chapter 10) appropriates $7,900,000 to counties as follows:

*Counties are eligible to receive funding if they submit a report to the Board of State and Community Corrections by December 15, 2015, that provides information about the actual implementation of the 2014-15 Community Corrections Partnership plan accepted by the County Board of Supervisors pursuant to Section 1230.1 of the Penal Code. The report shall include, but not be limited to, progress in achieving outcome measures as identified in the plan or otherwise available. Additionally, the report shall include plans for the 2015-16 allocation of funds, including future outcome measures, programs and services, and funding priorities as identified in the plan accepted by the County Board of Supervisors.*

Survey

To assist counties with reporting requirements this electronic survey was designed by the BSCC in consultation with the Department of Finance. Counties completing the survey in its entirety will have met the report requirement.

Responses to the survey will also be used by the BSCC to submit the annual report to the Governor’s Office and the Legislature on the implementation of Community Corrections Partnership (CCP) plans as required by section (11) of subdivision (b) of section 6027 of the penal code.

Survey Distribution

This survey has been distributed electronically to each Chief Probation Officer in the Chief’s capacity as CCP Chair. Each CCP Chair is encouraged to share the survey with CCP members prior to completion and submission. Responses should represent the collective views of the CCP and not a single agency or individual.

Funding

Funds will be distributed by January 31, 2016, to counties that comply with all survey requirements as follows:

(1) $100,000 to each county with a population of 0 to 200,000, inclusive, (2) $150,000 to each county with a population of 200,001 to 749,999, inclusive, and (3) $200,000 to each county with a
population of 750,000 and above. Allocations will be determined based on the most recent county population data published by the Department of Finance.

Due Date
One survey must be submitted electronically to the BSCC by Tuesday, December 15, 2015. The CCP is encouraged to collaborate on responses, and the CCP Chair should submit the survey. Only one submission by county will be accepted.
This survey consists of five sections:

Section 1: CCP Membership;
Section 2: How was your FY 2014-15 Public Safety Realignment Funding Allocated;
Section 3: Your Goals, Objectives and Outcome Measures;
Section 4: How was your FY 2015-16 Public Safety Realignment Funding Allocated; and
Section 5: Optional questions to help the BSCC understand what approaches work best.

In each section a response is required for each question before you can advance to the next question. However, the survey has a built-in logic feature that advances to the next pertinent question depending on the response you provide.

If you experience difficulty completing this survey, please contact:

Ricardo Goodridge, Field Representative
Board of State and Community Corrections
(916) 341-5160 or Ricardo.Goodridge@bscc.ca.gov

Please click the "Next" button below to begin the survey.
Section 1: CCP Membership

Section 1 asks questions related to the CCP composition and meeting frequency. There are five questions in this section.

**1. County Name (select from the below drop down menu)**

**2. Penal Code section 1230 identifies the membership of the CCP. Provide the name of each individual fulfilling a membership role as of October 1, 2015. If a membership role is not filled respond by indicating vacant.**

<table>
<thead>
<tr>
<th>Role Description</th>
<th>Name</th>
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<tbody>
<tr>
<td>Chief Probation Officer</td>
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<td>Presiding Judge of the Superior Court or designee</td>
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<td>County Supervisor or Chief Administrative Officer or a designee of the Board of Supervisors</td>
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<td>District Attorney</td>
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<td>Public Defender</td>
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<td>Sheriff</td>
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<td>Chief of Police</td>
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<td>Head of the County Department of Social Services</td>
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<td>Head of the County Department of Mental Health</td>
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<td>Head of the County Department of Employment</td>
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<tr>
<td>Head of the County Alcohol and Substance Abuse Programs</td>
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<td>Head of the County Office of Education</td>
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<tr>
<td>A representative from a community-based organization with experience in successfully providing rehabilitative services to persons who have been convicted of a criminal offense</td>
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<tr>
<td>An individual who represents the interests of victims</td>
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</tbody>
</table>
3. How often does the CCP meet?

- Bi-weekly (every other week)
- Monthly
- Bi-monthly (every other month)
- Quarterly
- Semi-Annually (twice a year)
- Annually
- Other (please specify)

[Extra space for text input]
4. How often does the Executive Committee of the CCP meet?

☐ Bi-weekly (every other week)
☐ Monthly
☐ Bi-monthly (every other month)
☐ Quarterly
☐ Semi-Annually (twice a year)
☐ Annually
☐ Other (please specify)

5. Does the CCP have subcommittees or working groups?

☐ Yes
☐ No

If "Yes" list the subcommittee(s) and/or working group(s) and the purpose.
Section 2 asks questions related to the allocation of FY 2014-15 Public Safety Realignment dollars. There are four questions in this section.

When answering these questions, a county should consider the total cash received in FY 2014-15, which includes 2013-14 growth and 2014-15 programmatic funding.

To view your responses provided in the 2014 survey [click here](#).

Responses are captured in the Individual County Profile section of the "2011 Public Safety Realignment Act: Third Annual Report on the Implementation of Community Corrections Partnership Plans."
FY 2015-16 Community Corrections Partnership Survey

6. Of the total cash received in FY 2014-15 how much went to public agencies?

Example: Allocation $40,000,000

Probation Department: $8,000,000
Mental Health Agency: $8,000,000
Sheriff Department: $8,000,000
ABC Police Department: $8,000,000
Other (social services, health services, etc. Please specify by agency): $8,000,000

Please spell out all organization names, no acronyms.
FY 2015-16 Community Corrections Partnership Survey

7. Of the total cash received in FY 2014-15 how much did the CCP allocate to public agencies for programs and services?

Example: Allocation $14,000,000

ABC Drug Court: $2,800,000
ABC Diversion Program: $2,800,000
GPS/Electronic Monitoring: $2,800,000
In-custody services: $2,800,000
Other (please specify): $2,800,000

Please spell out all organization names, no acronyms.
8. Of the total cash received in FY 2014-15 how much did the CCP allocate to non-public agencies for programs and services?

Example: Allocation $14,000,000

ABC Community-Based Organization: $2,800,000
ABC Faith-Based Organization: $2,800,000
ABC Service Provider: $2,800,000
ABC Treatment Program: $2,800,000
Other (please specify): $2,800,000

Please spell out all organization names, no acronyms.

9. While not required, how much if any funding was allocated to data collection and/or evaluation of AB 109 programs and services?
Section 3 asks questions related to your goals, objectives and outcome measures.

To view your responses provided in the 2014 survey click here.

For the purpose of this survey goals are broad statements regarding a desired outcome, objectives support identified goals, and outcome measures assist with the measurement of stated goals and objectives.

Example:

Goal
- Increase substance use disorder treatment to offenders in ABC County

Objective
- 40% of participants will complete substance use disorder treatment
- 100% of participants will receive screening for substance use disorder treatment

Outcome Measures
- Number of participants enrolled in substance use disorder treatment
- Number of participants completing substance use disorder treatment

Progress towards stated goal
- Between January 2015 and October 2015, 70% of participants in substance use disorder treatment reported a decrease in the urge to use drugs. This is a 10% increase from the same period last year.
10. Describe a goal, objective(s) and outcome measure(s) from FY 2014-15.

If the CCP kept the same goal, objective(s) and outcome measure(s) from a prior fiscal year for FY 2014-15 provide that information.

If no goal, objective(s) or outcome measure(s) were identified respond by indicating “Not Applicable”.

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<th>Goal</th>
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11. Describe a second goal, objective(s) and outcome measure(s) from FY 2014-15.

If the CCP kept the same goal, objective(s) and outcome measure(s) from a prior fiscal year for FY 2014-15 provide that information.

If no goal, objective(s) or outcome measure(s) were identified respond by indicating “Not Applicable”.

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12. Describe a third goal, objective(s) and outcome measure(s) from FY 2014-15.

If the CCP kept the same goal, objective(s) and outcome measure(s) from a prior fiscal year for FY 2014-15 provide that information.

If no goal, objective(s) or outcome measure(s) were identified respond by indicating “Not Applicable”.

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13. Will the CCP use the same goals, objectives and outcome measures identified above in FY 2015-16?

☐ Yes (proceeds to Section 4)

☐ No. The CCP will add or modify goals, objectives and outcome measures (continues with Section 3)
**14. Describe a goal, objective(s) and outcome measure(s) for FY 2015-16.**

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<td>Progress (If known)</td>
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**15. Describe a goal, objective(s) and outcome measure(s) for FY 2015-16.**

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<td>Progress (If known)</td>
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16. Describe a goal, objective(s) and outcome measure(s) for FY 2015-16.

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<td>Progress (If known)</td>
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</table>
Section 4 asks three questions related to the allocation of FY 2015-16 Public Safety Realignment funding.

When answering this question, a county should consider the total cash received in FY 2015-16, which includes 2014-15 growth and 2015-16 programmatic funding.

**17. Of the total cash received in FY 2015-16 how much went to public agencies?**

Example: Allocation $40,000,000

Probation Department: $8,000,000  
Mental Health Agency: $8,000,000  
Sheriff Department: $8,000,000  
ABC Police Department: $8,000,000  
Other (social services, health services, etc. Please specify by agency): $8,000,000

Please spell out all organization names, no acronyms.
18. If known, of the total cash received in FY 2015-16 how much did the CCP allocate to public agencies for programs and services?

Example: Allocation $14,000,000

ABC Drug Court: $2,800,000
ABC Diversion Program: $2,800,000
GPS/Electronic Monitoring: $2,800,000
In-custody services: $2,800,000
Other (please specify): $2,800,000

Please spell out all organization names, no acronyms.
19. If known, of the total cash received in FY 2015-16 how much did the CCP allocate to non-public agencies for programs and services?

Example: Allocation $14,000,000

ABC Community-Based Organization: $2,800,000
ABC Faith-Based Organization: $2,800,000
ABC Service Provider: $2,800,000
ABC Treatment Program: $2,800,000
Other (please specify): $2,800,000

Please spell out all names, no acronyms.
Section 5: Optional

Section 5 asks optional questions about evaluation, data collection, programs and services, training and technical assistance needs and local best practices.

There are eight questions in this section.

Responses will be used by the BSCC and its justice system partners to better understand the needs of counties.

20. Does the county evaluate the effectiveness (as defined locally) of programs and/or services funded with its Public Safety Realignment allocation?

☐ Yes
☐ No

If yes, how?
21. Does the county consider evaluation results when funding programs and/or services?

☐ Yes
☐ No

If yes, how?
22. Does the county use BSCC definitions (recidivism, average daily population, conviction, length of stay, and/or treatment program completion rates) when collecting data? To view the BSCC definitions [click here].

☐ Yes
☐ No

If yes, which terms: recidivism, average daily population, conviction, length of stay, and/or treatment program completion rates.

23. Of the total Public Safety Realignment funds allocated specifically to programs and/or services, what percentage is dedicated to evidence-based programming (as defined locally)?

☐ Less than 20%
☐ 21% - 40%
☐ 41% - 60%
☐ 61% - 80%
☐ 81% or higher

Comments on this response:
24. We would like to better understand your county's capacity to offer treatment, mental health, substance use disorder, behavioral health programs and/or other services.

What type and level of services are now available?
25. What challenges does your county face in meeting these programming and service needs?
26. What programmatic changes and/or course corrections have you made in the implementation of Public Safety Realignment that you believe other counties would find helpful?
27. Describe a local best practice or promising program that has displayed positive results. If data exists to support the results, please share.
28. Describe how the BSCC can assist your county in meeting its Public Safety Realignment goals through training or technical assistance.
Disclaimer and Contact Information

The information contained in this report will be made public by the BSCC in the annual report to the Governor’s Office and the Legislature on the implementation of Community Corrections Partnership plans in print and on the BSCC website.

*29. Provide the contact information for the individual completing this survey

Name: 
Organization: 
Address: 
Address 2: 
City/Town: 
ZIP: 
Email Address: 
Phone Number: 

*30. Identify the individual who may be contacted for follow up questions

☐ Same as above
☐ Other

If "Other" provide contact information

Thank You.

Ricardo Goodridge, Field Representative
Board of State and Community Corrections
(916) 341-5160 or Ricardo.Goodridge@bscc.ca.gov